

8-15-90

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT

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I.D. Number

Hazardous Waste Management

Facility Inspection Checklist for Compliance with
Interim Status Standards Covering Ground-Water Monitoring

FORM 4

Facility Name BOYERTOWN SANITARY DISPOSAL CO., INC.County MONTGOMERYCompany Address 300 MERKEL ROADGILBERTSVILLE, PACompany Contact/Official WARREN FRAMETitle PRESIDENT (OWNER)(215) 458-5300Facility Permit Number PADER 100500
PAD 048603005Municipality DOUGLASS TWP.Inspector's Name S. PANTELIDOU

Branch/Organization _____

Date of Inspection 8-7-90

Type of facility: (check appropriately)

- a) surface impoundment
b) landfill
c) land treatment facility
d) disposal waste pile*

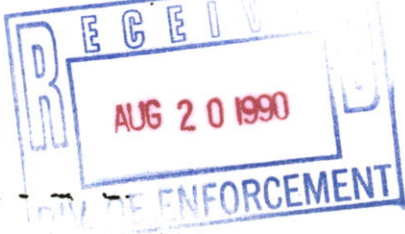
Yes No Unknown

	x	
x		
	x	
	x	

Ground-Water Monitoring Program

1. Was the ground-water monitoring program reviewed prior to site visit? x If "No", _____
- a) Was the ground-water program reviewed at the facility prior to site inspection? N/A _____
2. Has a ground-water monitoring program (capable of determining the facility's impact on the quality of any ground-water system which the facility has the potential to affect, or as otherwise deemed necessary by the Department) been implemented? 75.265(n)(1) ✓ _____
3. Has at least one monitoring well been installed hydraulically upgradient from the limit of the waste management area? 75.265(n)(3)(i) ✓ _____
- a) Are ground-water samples from the upgradient well representative of background ground-water quality and not affected by the facility (as ensured by proper well number, locations, and depths)? ✓* _____

Listed separate from landfill for convenience of identification.



Samples may be affected by radial flow from the landfill.

1000 0 5 200

Yes No Unknown

4. Have at least three monitoring wells been installed hydraulically downgradient at the perimeter of the waste management area?
75.265(n)(3)(ii)

✓

a) Do well number, locations, and depths ensure prompt detection of any statistically significant amounts of hazardous waste or hazardous waste constituents that migrate from the waste management area to the groundwater?

✓

b) Have the locations of the monitoring wells been approved by the Department? 75.265(n)(3)(iii).

✓

5. Have the locations of the waste management areas been verified to conform with information in the ground-water program?

✓

a) If the facility contains multiple waste management components, is each component adequately monitored?

✓

6. Do the numbers, locations, and depths of the ground-water monitoring wells agree with the data in the ground-water monitoring system program? (If "No", explain discrepancies on an attachment.)

✓

7. Well completion details: 75.265(n)(5) and 75.265(n)(6)

a) Are wells properly cased?

✓

b) Are wells screened (perforated) and packed where necessary to enable sampling at appropriate depths?

✓

c) Are annular spaces properly sealed to prevent contamination of samples and the ground water?

✓

8. Has a ground-water sampling and analysis plan been developed?
75.265(n)(7)

✓

a) Has it been followed?

✓ - no samples
8/89 → 9/90

b) Is the plan kept at the facility?

✓ - site is closed.

c) Does the plan include procedures and techniques for:

1) Sample collection?

✓

2) Sample preservation?

✓

3) Sample shipment?

✓

4) Analytical procedures?

✓

5) Chain of custody control?

✓

	Yes	No	Unknown
9. ^{Were} Are the required parameters in ground-water samples being tested quarterly for the first year? 75.265(n)(8) and 75.265(n)(9)	✓		
a) ^{Were} Are the ground-water samples analyzed for the following:			
1) Parameters characterizing the suitability of the ground-water as a drinking water supply? 75.265(n)(8)(i)	✓		
2) Parameters establishing ground-water quality? 75.265(n)(8)(ii)	✓		
3) Parameters used as indicators of ground-water contamination? 75.265(n)(8)(iii)	✓		
(i) Has provision been made for the establishment of initial background concentrations of all parameters in all monitoring wells quarterly during the first year? 75.265(n)(9)	✓		
(ii) For each indicator parameter, are at least four replicate measurements obtained at each upgradient well for each sample obtained during the first year of monitoring? 75.265(n)(10)			✓
(iii) Are provisions made to calculate the initial background arithmetic mean and variance of the respective parameter concentrations or values obtained from the upgradient well(s) during the first year? 75.265(n)(10)			✓
b) For facilities which have completed first year ground-water sampling and analysis requirements:			
1) Have samples been obtained and analyzed for the ground-water quality parameters at least semi-annually? 75.265(n)(11)(i)		✓	Three quarters have been missed.
2) Have samples been obtained and analyzed for the indicators of ground-water contamination at least quarterly? 75.265(n)(11)(ii)		✓	"
c) Were ground-water surface elevations determined at each monitoring well each time a sample was taken? 75.265(n)(12)		✓	"
d) Were the ground-water surface elevations evaluated at least annually (by January 31) to determine whether the monitoring wells are properly constructed? 75.265(n)(17)		✓	"
e) If it was determined that modification of the number, location, or depth of monitoring wells was necessary, was the system brought into compliance with 75.265(n)(3)? 75.265(n)(17)	✓		
f) Prior to any construction modification, were any proposed changes approved in writing by the Department? 75.265(n)(17)	✓		

	Yes	No	Unknown
10. Has an outline of a ground-water quality assessment and abatement program been prepared? 75.265(n)(13)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) Does it describe a program capable of the following:			
1) Determining which hazardous waste or hazardous waste constituents have entered the ground water? 75.265(n)(13)(i)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Determining the rate and extent of migration of hazardous waste or hazardous waste constituents in ground water? 75.265(n)(13)(ii)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Determining concentrations of hazardous waste or hazardous waste constituents in ground water? 75.265(n)(13)(iii)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Abating any ground-water contamination attributable to the hazardous waste management facility? 75.265(n)(13)(iv)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) After the first year of monitoring, have at least four replicate measurements of each indicator parameter been obtained for samples taken from each well monitored? 75.265(n)(14)	<input type="checkbox"/>	<input checked="" type="checkbox"/> *	<input type="checkbox"/>
1) Were the results compared with the initial background means from the upgradient well(s) determined during the first year?	<input type="checkbox"/>	<input checked="" type="checkbox"/> *	<input type="checkbox"/>
(i) Was each well considered individually?	<input type="checkbox"/>	<input checked="" type="checkbox"/> *	<input type="checkbox"/>
(ii) Was the Student's t-test used at the appropriate level of significance (see Chapter 75, Subchapter D, Appendix III)?	<input type="checkbox"/>	<input checked="" type="checkbox"/> *	<input type="checkbox"/>
2) Was a significant increase (or pH decrease as well) found in the:			
(i) Upgradient wells	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(ii) Downgradient wells	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If "Yes", Hazardous Waste Management Form 5 must also be completed.			
11. Have records been kept of the analyses required in paragraphs 75.265(n)(9) through 75.265(n)(11)? 75.265(n)(18)(i)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Have records been kept of ground-water surface elevations taken at the time of sampling for each well (75.265(n)(12))? 75.265(n)(18)(i)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Have records been kept of required elevations in indicator parameters (75.265(n)(14))? 75.265(n)(18)(i) <i>Revaluations</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Three quarters of data have been missed.

historically

Yes No Unknown

14. Has the following ground-water information been reported to the Department: 75.265(n)(18)(ii)

(a)(i) During the first year, initial background concentrations of parameters listed in 75.265(n)(8)(i) within 15 days after completing each quarterly analysis required during the first year?

✓

(ii) For each well, have any parameters whose concentrations or values have exceeded the maximum contaminant levels allowed in drinking water supplies been separately identified?

 ✓*

(b)(i) Semi-annual measurements of the parameters establishing ground-water quality (75.265(n)(8)(ii)) for each ground-water monitoring well taken at the end of the first (April 1) and third (October 1) quarters?

 ✓*

(ii) Have any significant differences from the initial background found in the wells been separately identified?

 ✓*

(iii) Has this information been submitted as part of the quarterly report (75.265(m)) for those facilities receiving hazardous waste from off-site sources?

N/A

(c)(i) Quarterly measurement of the parameters used as indicators of ground-water contamination (75.265(n)(8)(iii)) and the required evaluations of these parameters under 75.265(n)(14)?

 ✓*

(ii) Have any significant differences from initial background found in the upgradient wells been separately identified and included in the quarterly submission?

 ✓*

(d)(i) Quarterly results of the evaluation of ground-water surface elevations under 75.265(n)(17)?

 ✓*

(ii) If applicable, has a description of the response to that evaluation been included?

 ✓*

↑
* Three quarters of sampling have not been performed.

Compliance Monitoring Evaluation Narrative - O&M inspection
Boyertown Sanitary Disposal, Inc.
August 15, 1990
Sarah Pantelidou, Regional Hydrogeologist

1. Boyertown Sanitary Disposal, Inc. is a closed municipal waste landfill which accepted some hazardous and residual waste with PADER approval. Hazardous waste was accepted from various generators using the Module No. 1 process. The facility generates leachate which is considered to be a hazardous waste. The leachate is pre-treated in an on-site treatment plant before it is discharged to the sanitary sewer.

PADER records show that the facility accepted the following soils and sludges: (soils) F001, K052, K086, K100, U228, U002, U019, U220, U239, U078, U079, U080, U159, U210, U226, U227, U154, U161; (sludges) D001 through D017, F006 through F010, F012, F018, K005, K006, K062, K063, K081, K086, P029, P030, P055, P074, P098, P106, P121, V052, V054, V123, V134, V188.

2. The Part B application for the site was withdrawn and a closure plan was submitted on 8/11/83. A Consent Order and Agreement (CO&A) was issued by PADER on 5/23/84, resulting in a permit for a leachate surface impoundment. A Closure Order was issued by PADER on 8/21/84. The closure plan was approved in 1988. An expansion was applied for, but was withdrawn in 1988, following promulgation of the new PA Municipal Waste Regulations. The RCRA post-closure care permit application was called in, but never submitted. In 1989, Waste Management, Inc. purchased the hauling contracts of BDS, Inc., and currently rents storage space at the landfill for empty roll-off containers and equipment. The landfill itself is still owned by BDS, Inc.

3. See attached maps for location of facility and ground water monitoring wells. The old unlined landfill is located west of (decommissioned) monitoring well 4; the old fill may contain hazardous waste in addition to the Module 1 waste in the lined area.

4. No current sampling data is attached as PADER did not split samples with the facility in 1990. Refer to 1989 results. BDS, Inc. currently does not have a ground water sampling contractor and has missed three quarterly sampling rounds. The owner has been contacted by PADER and has been told to resume sampling immediately. PADER is working on a penalty assessment for the missed quarters.

5. BDS, Inc. may not have background monitoring wells owing to suspected radial flow at the site. Ground water contamination is suspected; barium occurs in several wells and low-level (a few

ppb) TCE usually occur in the garage well (#1).

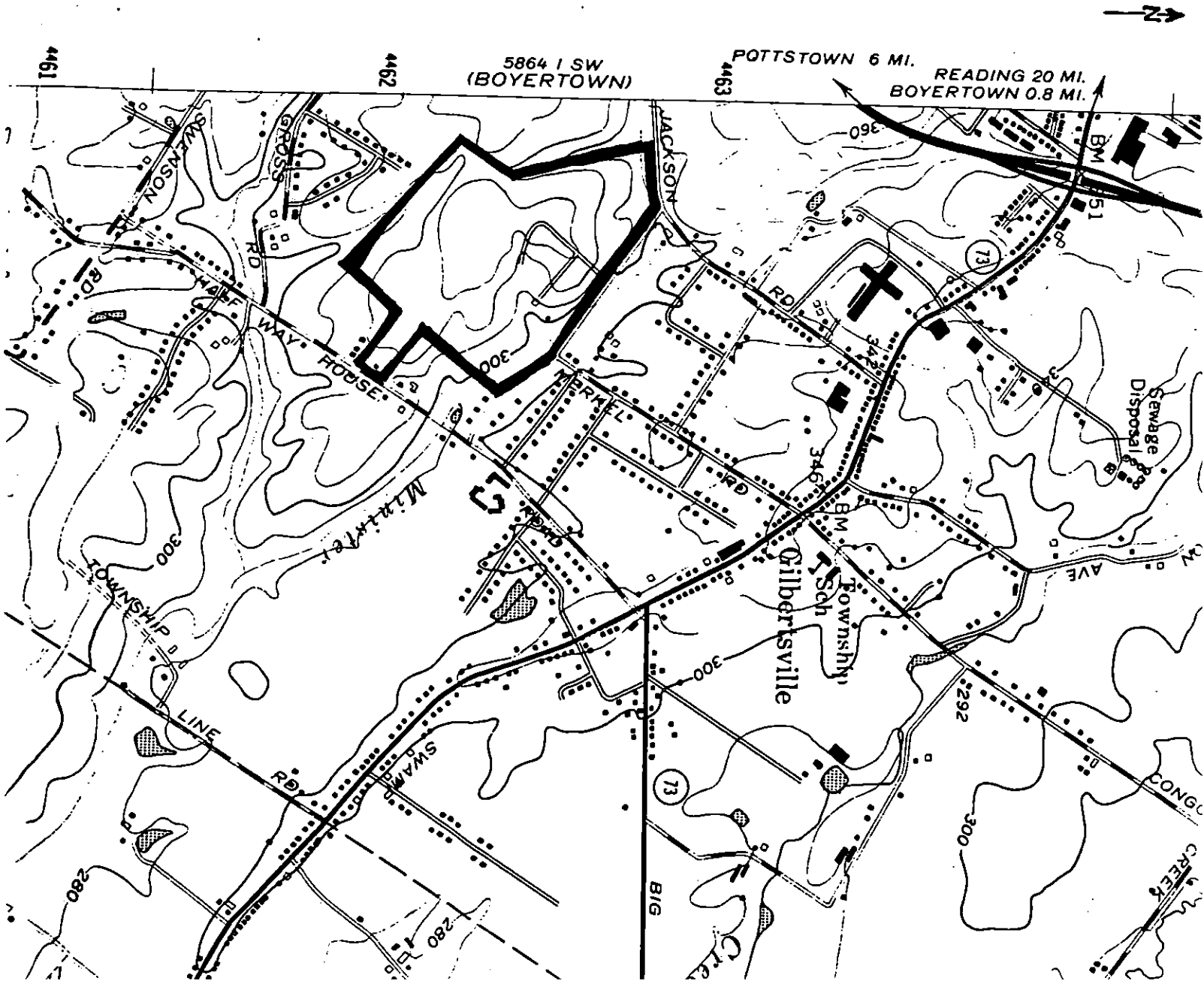
6. In conclusion, the major violation at the site has been the three missing quarters of ground water data; minor violations found during a site inspection on August 7, 1990 include lack of concrete aprons surrounding most wells, and no covers on interior PVC casing of wells. All wells had locking caps, however some were rusted and had to be cut off with boltcutters.

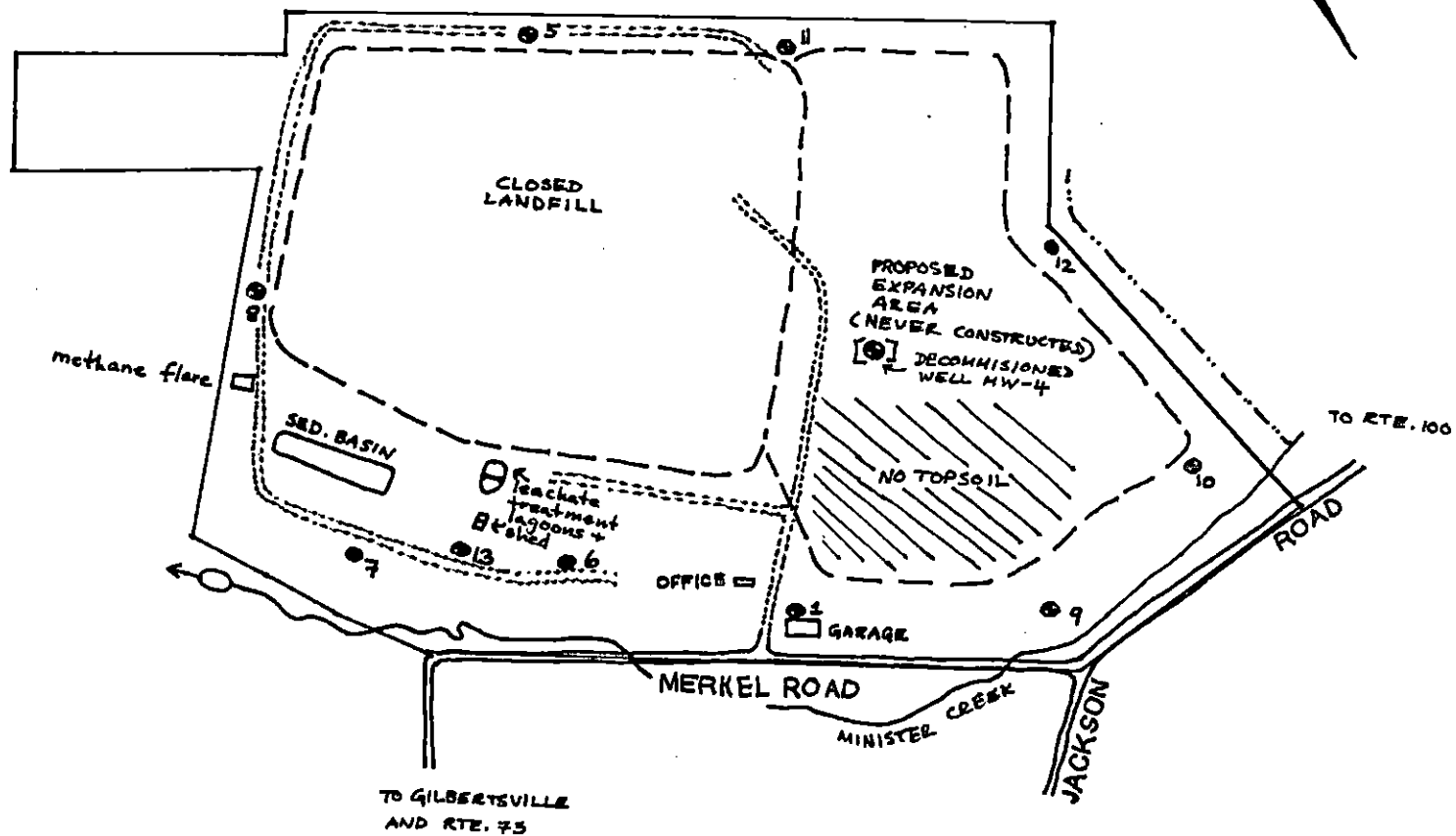
References: Facility Management Plan (BDS, Inc.) 3/5/86
R.Greaves(USEPA) to L.Kuchinski(PADER) 7/26/90

Attachments (two maps, 1990 well inspection notes)

cc: Ms. Kurtz
Mr. Rarick, Central Office
File

SASSAMANSVILLE QUAD.
 REVISED 1973
 ENLARGED 141%





0.5cm. = 200'
(1cm. = 400')

BOYERTOWN LANDFILL
(BOYERTOWN SANITARY DISPOSAL COMPANY)
FROM: A.G.E.S. REPORT, 1992
AND (E.P.A. PA-535)

S. PANTELIDOU, PADER, 8/90
WELL LOCATIONS ARE APPROXIMATE.
4-WHEEL DRIVE NECESSARY BETWEEN
WELLS .8 AND 5.

Site Inspection - Boyetown Sanitary
Disposal Service, Inc.
Douglass Twp, Mont. County

August 7, 1990 1:10 p.m. to 2:10 p.m.

C. Kurtz, J. Pagano,
S. Pantelidou / PADER
John Kessler (B.D.S.)

Weather: P'tly. sunny, humid, 70's.

Locks opened by site contact.

MW-6: above treatment plant unlocked by JK but ^{lid} too stiff to open.

MW-13: (inside leachate treatment plant fence) (labeled SMW); no concrete collar, weeds.

MW-7: no concrete collar or inner cap on casing.

MW-8: "

MW-5: " and four-wheel-drive
necessary between MW-8 and MW-5. (consultant in 1989
would not take vehicle back there.)

MW-11: key did not work, lock was cut off; no inner cap.

MW-9: no concrete collar or inner cap on casing.

MW-10: ^{cap on} no inner casing.

MW-12: lock would not open, lock was cut off; otherwise ok.

NOTE: Did not check GARAGE Well. (#1)
page 14

9-19-89

Date Prepared

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES
BUREAU OF SOLID WASTE MANAGEMENT

TSD

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I.D. Number

Hazardous Waste Management

Facility Inspection Checklist for Compliance with
Interim Status Standards Covering Ground-Water Monitoring

FORM 4

Facility Name

BOYERTOWN SANITARY
DISPOSAL CO., INC.

Facility Permit Number

PDER 100500

County

MONTGOMERY

Municipality

GILBERTSVILLE

Company Address

300 MERKEL ROAD

Inspector's Name

PANTELIDOU

19525

Company Contact/Official

MICHAEL MILLER

Branch/Organization

BSD. CO., INC.

Title

VICE PRESIDENT

Date of Inspection

9.13.89

Type of facility: (check appropriately)

Yes

No

Unknown

- a) surface impoundment
b) landfill
c) land treatment facility
d) disposal waste pile*

	✓	
✓		
	✓	
	✓	

Ground-Water Monitoring Program

1. Was the ground-water monitoring program reviewed prior to site visit? ✓
If "No",

- a) Was the ground-water program reviewed at the facility prior to site inspection? N/A

Has a ground-water monitoring program (capable of determining the facility's impact on the quality of any ground-water system which the facility has the potential to affect, or as otherwise deemed necessary by the Department) been implemented? 75.265(n)(1) ✓

3. Has at least one monitoring well been installed hydraulically upgradient from the limit of the waste management area? 75.265(n)(3)(i) ✓

- a) Are ground-water samples from the upgradient well representative of background ground-water quality and not affected by the facility (as ensured by proper well number, locations, and depths)? ✓*

* Listed separate from landfill for convenience of identification.

* the landfill is probably affecting all the wells around it.

	Yes	No	Unknown
4. Have at least three monitoring wells been installed hydraulically downgradient at the perimeter of the waste management area? 75.265(n)(3)(ii)	<u>✓</u>	<u> </u>	<u> </u>
a) Do well number, locations, and depths ensure prompt detection of any statistically significant amounts of hazardous waste or hazardous waste constituents that migrate from the waste management area to the groundwater? <i>shallow, medium, deep</i>	<u>✓</u>	<u> </u>	<u> </u>
b) Have the locations of the monitoring wells been approved by the Department? 75.265(n)(3)(iii)	<u>✓</u>	<u> </u>	<u> </u>
5. Have the locations of the waste management areas been verified to conform with information in the ground-water program?	<u>✓</u>	<u> </u>	<u> </u>
a) If the facility contains multiple waste management components, is each component adequately monitored?	<u>✓</u>	<u> </u>	<u> </u>
Do the numbers, locations, and depths of the ground-water monitoring wells agree with the data in the ground-water monitoring system program? (If "No", explain discrepancies on an attachment.)	<u>✓</u>	<u> </u>	<u> </u>
7. Well completion details: 75.265(n)(5) and 75.265(n)(6)			
a) Are wells properly cased?	<u>✓</u>	<u> </u>	<u> </u>
b) Are wells screened (perforated) and packed where necessary to enable sampling at appropriate depths?	<u>✓</u>	<u> </u>	<u> </u>
c) Are annular spaces properly sealed to prevent contamination of samples and the ground water?	<u>✓</u>	<u> </u>	<u> </u>
8. Has a ground-water sampling and analysis plan been developed? 75.265(n)(7)	<u>✓</u>	<u> </u>	<u> </u>
a) Has it been followed?	<u> </u>	<u> </u>	<u>✓* some historical students t-test not submitted.</u>
b) Is the plan kept at the facility?	<u> </u>	<u> </u>	<u>✓* at consultants office</u>
c) Does the plan include procedures and techniques for:			
1) Sample collection?	<u>✓</u>	<u> </u>	<u> </u>
2) Sample preservation?	<u>✓</u>	<u> </u>	<u> </u>
3) Sample shipment?	<u>✓</u>	<u> </u>	<u> </u>
4) Analytical procedures?	<u>✓</u>	<u> </u>	<u> </u>
5) Chain of custody control?	<u>✓</u>	<u> </u>	<u> </u>

	Yes	No	Unknown
9. Are the required parameters in ground-water samples being tested quarterly for the first year? 75.265(n)(8) and 75.265(n)(9)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) Are the ground-water samples analyzed for the following:			
1) Parameters characterizing the suitability of the ground-water as a drinking water supply? 75.265(n)(8)(i)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Parameters establishing ground-water quality? 75.265(n)(8)(ii)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Parameters used as indicators of ground-water contamination? 75.265(n)(8)(iii)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(i) Has provision been made for the establishment of initial background concentrations of all parameters in all monitoring wells quarterly during the first year? 75.265(n)(9)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(ii) For each indicator parameter, are at least four replicate measurements obtained at each upgradient well for each sample obtained during the first year of monitoring? 75.265(n)(10)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(iii) Are provisions made to calculate the initial background arithmetic mean and variance of the respective parameter concentrations or values obtained from the upgradient well(s) during the first year? 75.265(n)(10)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b) For facilities which have completed first year ground-water sampling and analysis requirements:			
1) Have samples been obtained and analyzed for the ground-water quality parameters at least semi-annually? 75.265(n)(11)(i)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Have samples been obtained and analyzed for the indicators of ground-water contamination at least quarterly? 75.265(n)(11)(ii)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Were ground-water surface elevations determined at each monitoring well each time a sample was taken? 75.265(n)(12)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Were the ground-water surface elevations evaluated at least annually (by January 31) to determine whether the monitoring wells are properly constructed? 75.265(n)(17)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e) If it was determined that modification of the number, location, or depth of monitoring wells was necessary, was the system brought into compliance with 75.265(n)(3)? 75.265(n)(17)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Prior to any construction modification, were any proposed changes approved in writing by the Department? 75.265(n)(17)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Yes	No	Unknown
10. Has an <u>outline</u> of a ground-water quality assessment and abatement program been prepared? 75.265(n)(13)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a) Does it describe a program capable of the following:			
1) Determining which hazardous waste or hazardous waste constituents have entered the ground water? 75.265(n)(13)(i)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Determining the rate and extent of migration of hazardous waste or hazardous waste constituents in ground water? 75.265(n)(13)(ii)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Determining concentrations of hazardous waste or hazardous waste constituents in ground water? 75.265(n)(13)(iii)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Abating any ground-water contamination attributable to the hazardous waste management facility? 75.265(n)(13)(iv)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) After the first year of monitoring, have at least four replicate measurements of each indicator parameter been obtained for samples taken from each well monitored? 75.265(n)(14)	<input checked="" type="checkbox"/> * <i>no results submitted in '84-'85</i>	<input type="checkbox"/>	<input type="checkbox"/>
1) Were the results compared with the initial background means from the upgradient well(s) determined during the first year?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(i) Was each well considered individually?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(ii) Was the Student's t-test used at the appropriate level of significance (see Chapter 75, Subchapter D, Appendix III)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Was a significant increase (or pH decrease as well) found in the:			
(i) Upgradient wells	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(ii) Downgradient wells	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If "Yes", Hazardous Waste Management Form 5 must also be completed.</i>			
11. Have records been kept of the analyses required in paragraphs 75.265(n)(9) through 75.265(n)(11)? 75.265(n)(18)(i)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Have records been kept of ground-water surface elevations taken at the time of sampling for each well (75.265(n)(12))? 75.265(n)(18)(i)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Have records been kept of required elevations <i>evaluations</i> in indicator parameters (75.265(n)(14))? 75.265(n)(18)(i)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

		Yes	No	Unknown
14.	Has the following ground-water information been reported to the Department: 75.265(n)(18)(ii)			
(a)(i)	During the first year, initial background concentrations of parameters listed in 75.265(n)(8)(i) within 15 days after completing each quarterly analysis required during the first year?	<u>✓</u>	<u> </u>	<u> </u>
(ii)	For each well, have any parameters whose concentrations or values have exceeded the maximum contaminant levels allowed in drinking water supplies been separately identified?	<u>✓</u>	<u> </u>	<u> </u>
(b)(i)	Semi-annual measurements of the parameters establishing ground-water quality (75.265(n)(8)(ii)) for each ground-water monitoring well taken at the end of the first (April 1) and third (October 1) quarters?	<u>✓</u>	<u> </u>	<u> </u>
(ii)	Have any significant differences from the initial background found in the wells been separately identified?	<u>✓</u>	<u> </u>	<u> </u>
(iii)	Has this information been submitted as part of the quarterly report (75.265(m)) for those facilities receiving hazardous waste from off-site sources?	<u>✓</u>	<u> </u>	<u> </u>
(c)(i)	Quarterly measurement of the parameters used as indicators of ground-water contamination (75.265(n)(8)(iii)) and the required evaluations of these parameters under 75.265(n)(14)?	<u>✓</u>	<u> </u>	<u> </u>
(ii)	Have any significant differences from initial background found in the upgradient wells been separately identified and included in the quarterly submission?	<u>✓</u>	<u> </u>	<u> </u>
(d)(i)	Quarterly results of the evaluation of ground-water surface elevations under 75.265(n)(17)?	<u>✓</u>	<u> </u>	<u> </u>
(ii)	If applicable, has a description of the response to that evaluation been included?	<u>✓</u>	<u> </u>	<u> </u>

Boyertown Disposal Co., Inc.
Gilbertsville, Montgomery County
Form 4 Inspection Comment Sheet

Boyertown Landfill is now closed and revegetated; ground water sampling has continued as has leachate collection and treatment. There is still no direct sewer link from the landfill to the township system. Ground water in the perimeter monitoring wells continues to be of surprisingly good quality; contaminants are iron, manganese and, in Well 1, trichloroethylene (tens of parts per billion).

Purge water from the monitoring wells is not being contained although this is required under RCRA. Several wells are not accessible except by four-wheel-drive vehicle and machete. Most wells need at least one hour to recover after purging; there are eleven wells at the site (1,5,6,7,8,9,10, 11,12 and Shallow Monitoring Well (SMW)) which are usually sampled over two days.

The area around the site office is used for storing Waste Management Inc. roll-off containers, dumpsters and portable toilets; the landfill owner has his garbage collection routes to WMI, but not the landfill itself.

Commonwealth of Pennsylvania
Department of Environmental Resources
Bureau of Solid Waste Management

9-19-89

Date Prepared

I.D. Number

Hazardous Waste Management

Inspection Compliance Checklist for a Facility Which
May Be Affecting Ground-Water Quality
(Form 5)

BOYERTOWN SANITARY
DISPOSAL CO, INC.

Facility Name

Facility Permit Number PDER 100500

County

MONTGOMERY

Municipality

GILBERTSVILLE

Company Address

300 MERKEL

Inspector's Name

PANTELI DOOROAD, 19525

Company Contact/Official

MICHAEL MILLER

Branch/Organization

B.S.D. CO., INC.

e

VICE PRESIDENT

Date of Inspection

9-13-89

Type of facility: (check appropriately)

Yes	No	Unknown
<u>✓</u>	<u>✓</u>	<u> </u>
<u>✓</u>	<u> </u>	<u> </u>
<u> </u>	<u>✓</u>	<u> </u>
<u> </u>	<u>✓</u>	<u> </u>

- a) surface impoundment
b) landfill
c) land treatment facility
d) disposal waste pile

1. Have comparisons of ground-water contamination indicator parameters (75.265(n)(8)(iii)) for the upgradient well(s) shown a significant increase (or pH decrease as well) over initial background? 75.265(n)(14)(i)

<u>✓</u>	<u> </u>	<u> </u>
----------	------------	------------

- a) If "Yes", has this information been submitted to the Department according to 75.265(n)(18)(ii)(B)?

<u>✓</u>	<u> </u>	<u> </u>
----------	------------	------------

2. Have comparisons of indicator parameters for the downgradient wells (75.265(n)(8)(iii)) shown a significant increase (or pH decrease as well) over initial background? 75.265(n)(14)(ii)

<u>✓</u>	<u> </u>	<u> </u>
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- a) If "Yes", were additional ground-water samples taken for those downgradient wells where the significant difference was determined? 75.265(n)(14)(ii)

<u>✓</u>	<u> </u>	<u> </u>
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- 1) Were samples split in two?

<u>✓</u>	<u> </u>	<u> </u>
----------	------------	------------

- 2) Was the significant difference due to human (e.g., laboratory) error? If "Yes", do not continue.

<u>✓</u>	<u> </u>	<u> </u>
----------	------------	------------

	<u>Yes</u>	<u>No</u>	<u>Unknown</u>
3. If significant differences were not due to error, was a written notice sent to the Department within 7 days of confirmation? 75.265(n)(15)	<u>✓</u>	<u> </u>	<u> </u>
4. Within 30 days of notification of the Department, was a certified ground-water quality assessment plan, based on the outline required by 75.265(n)(13), developed and submitted for approval? 75.265(n)(15)(i)	<u>✓</u>	<u> </u>	<u> </u>
a) Does the plan specify 75.265(n)(15)(ii):			
1) well information (specifics)	<u>✓</u>	<u> </u>	<u> </u>
(a) number?	<u>✓</u>	<u> </u>	<u> </u>
(b) locations?	<u>✓</u>	<u> </u>	<u> </u>
(c) size?	<u>✓</u>	<u> </u>	<u> </u>
(d) depths?	<u>✓</u>	<u> </u>	<u> </u>
2) sampling methods?	<u>✓</u>	<u> </u>	<u> </u>
3) analytical methods?	<u>✓</u>	<u> </u>	<u> </u>
4) evaluation procedures?	<u>✓</u>	<u> </u>	<u> </u>
5) abatement procedures?	<u>✓</u>	<u> </u>	<u> </u>
6) schedule of implementation?	<u>✓</u>	<u> </u>	<u> </u>
b) Does the plan allow for determination of 75.265(n)(15)(iii):			
1) Rate and extent of migration of hazardous waste or hazardous waste constituents in the ground water?	<u>✓</u>	<u> </u>	<u> </u>
2) Concentrations of the hazardous waste or hazardous waste constituents in the ground water?	<u>✓</u>	<u> </u>	<u> </u>
c) Is it indicated that the first determination was made as soon as technically feasible? 75.265(n)(15)(iv)	<u>✓</u>	<u> </u>	<u> </u>
1) Within 15 days after the first determination, was a written report containing the assessment of ground-water quality submitted to the Department?	<u>✓</u>	<u> </u>	<u> </u>

	<u>Yes</u>	<u>No</u>	<u>Unknown</u>
d) Was it determined that hazardous waste or hazardous waste constituents from the facility have entered the ground water?	<u>✓</u>	<u> </u>	<u> </u>
1) If "No", was the original indicator evaluation program, required by 75.265(n)(7) - 75.265(n)(12) and 75.265(n)(14), reinstated?	<u>N/A</u>	<u> </u>	<u> </u>
a) Was the Department notified of the reinstatement of program within 15 days of the determination? 75.265(n)(15)(v)	<u>N/A</u>	<u> </u>	<u> </u>
e) If it was determined that hazardous waste or hazardous waste constituents have entered the ground water (75.265(n)(15)(vi)):			
1) For facilities where the program was implemented prior to final closure, are determinations of hazardous waste or hazardous waste constituents continued on a quarterly basis?	<u>✓</u>	<u> </u>	<u> </u>
(If the program was implemented during the post-closure care period, determinations made in accordance with the ground-water quality assessment plan may cease after the first determination.)			
(a) Were subsequent ground-water quality reports submitted to the Department within 15 days of determination?	<u>✓</u>	<u> </u>	<u> </u>
(b) Has an approvable abatement plan, to be used to abate the ground-water contamination, been developed and submitted to the Department?	<u>✓</u>	<u> </u>	<u> </u>
2) Were records kept of the analyses and evaluations, specified in the ground-water quality assessment (throughout the active life of the facility)? 75.265(n)(19)(i)	<u>✓</u>	<u> </u>	<u> </u>
(a) If a disposal facility, were(are) records kept throughout the post-closure period as well?	<u>✓* so far</u>	<u> </u>	<u> </u>
f) Are annual reports being submitted to the Department by January 31, which contain the results of the ground-water quality assessment program? 75.265(n)(19)(ii)	<u> </u>	<u>✓</u>	<u> </u>
1) Do the reports include the calculated or measured rate of migration of hazardous waste or hazardous waste constituents in the ground water during the reporting period?	<u> </u>	<u>✓*</u>	<u> </u>
2) Do the reports include the measured volumes of hazardous waste or hazardous waste constituents removed from ground water using the abatement procedures specified in 75.265(n)(15)(vi)(C)?	<u> </u>	<u>✓*</u>	<u> </u>

Assessment performed in 1984.
Sole abatement to date is:
pumping of well 1, some leachate
treatment, pumping of haz. waste
leachate sump.

Hazardous Waste Inspection Report
 TSD Facilities - Part A

6-21-89

Date of inspection 6-21-89 Time start _____ Time finish _____
 Name of inspector Meg Mustard
 Company, installation name Boyerstown Landfill
 Location 300 Merkel Rd, Gilbertsville, PA 19525
 County Montgomery Municipality Douglas Twp
 Identification number PA048603005
 Name of responsible official Walter Frame
 Title President
 Mailing address RD #1 Box 360 Glenmoor, PA 19343
 Area code and telephone number (215) 458-5300
 Name of person interviewed John Kessler
 Title _____
 Mailing address (if different from above) Same
 Area code and telephone number Same

1. Site characterization:

- | | | | | |
|--|--|--|---|--|
| a. <input checked="" type="checkbox"/> Treatment | <input checked="" type="checkbox"/> surface impoundments | <input checked="" type="checkbox"/> chemical | <input type="checkbox"/> physical | <input checked="" type="checkbox"/> biological |
| b. <input type="checkbox"/> Storage | <input type="checkbox"/> containers | <input type="checkbox"/> tanks | <input type="checkbox"/> surface impoundments | <input type="checkbox"/> waste piles |
| c. <input checked="" type="checkbox"/> Disposal | <input type="checkbox"/> land treatment | <input checked="" type="checkbox"/> landfill | <input type="checkbox"/> incineration | <input type="checkbox"/> thermal treatment |
| d. <input type="checkbox"/> Use | <input type="checkbox"/> reuse | <input type="checkbox"/> recycle | <input type="checkbox"/> reclaim | |

2. Does the facility generate hazardous wastes? ☒ Yes ☐ No

3. Types of hazardous waste produced by Hazardous Waste Number:

4. Are hazardous wastes transported off-site by the facility? ☐ Yes ☒ No

[illegible]

[illegible]

Hazardous Waste Inspection Report
Comments - Part C

Date of Inspection 6-21-89 Identification Number PAD048603005
Company, Installation Name Boyertown Landfill
County Montgomery Municipality Douglas Twp

Permission to inspect the facility was given by Mr. John Kessler.

The leachate level of the lagoons were below the two (2) foot level. The freeboard level of the lagoons should be inspected each day and then documented to verify the inspection.

Closure of the raw leachate lagoon should be addressed on a Hazardous waste Part B application will have to be submitted to the Department.

The pH of the treated effluent was 7.1 at the time of the inspection.

This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Waste Management, inspected the above installation. The findings of this inspection are shown in this report. Any violations which were uncovered during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Notification will be forthcoming, confirming any violations indicated herein and listing any additional violations.

Person Interviewed (signature) _____ Date _____

Inspector (signature) Meg Mustard Date 6-21-89

Hazardous Waste Inspection Report Generators - Part A

Date of inspection 6-21-89 Time start _____ Time finish _____
Name of inspector Moq Mustard
Company, installation name Bountown Sanitary Landfill
Location 300 Merkel Rd, Gilbertsville PA 19525
County Montgomery Municipality Douglas Twp
Identification number PA048603005
Name of responsible official Wamen Frame
Title President
Mailing address RD #1, Box 3100, Glenmoor, PA 19343
Area code and telephone number (215) 458-5300
Name of person interviewed John Kessler
Title _____
Mailing address (if different from above) Same
Area code and telephone number Same

1. Current waste handling method:

- a. ☒ On-site ☒ treatment, ☒ storage, ☐ disposal ☐ PBR
- b. ☐ On-site ☐ use, ☐ reuse, ☐ recycle, ☐ reclaim
- c. ☒ Off-site ☒ treatment, ☐ storage, ☒ disposal
- d. ☐ Off-site ☐ use, ☐ reuse, ☐ recycle, ☐ reclaim

2. Amount of hazardous waste produced:

- a. _____ kg./mo.
- b. _____ kg./yr.

[illegible][illegible]

Hazardous Waste Inspection Report
Comments - Part CDate of Inspection 6-21-89 Identification Number PAD 0486 0300Company, Installation Name Boyetown LandfillCounty Montgomery Municipality Douglas Twp

Permission to inspect the facility was given
by Mr. John Kessler

Leachate levels in the lagoons were below
the two (2) foot level

The sludge in the aeration tank has not
been cleaned out.

This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Waste Management, inspected the above installation. The findings of this inspection are shown in this report. Any violations which were uncovered during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Notification will be forthcoming, confirming any violations indicated herein and listing any additional violations.

Person Interviewed (signature) _____

Date _____

Inspector (signature) _____

Date 6/21/89

Inspection Report — Municipal Waste Landfill

Site I.D. # 100550
 Site Name Bogertown Landfill
 Address 300 Merkel Rd
Gilbertsville, PA 19525
 Municipality Douglas Twp
 Responsible Official Warren Frame
 Person Interviewed John Kessler
 Inspector Meg Mustard

Telephone # (215) 458-5300
 Operator Name Warren Frame
 Address RD #1 Box 360
Glennmoor, PA 19343
 County Montgomery
 Title _____
 Title _____
 Time _____

Due Date 06/21/89 Inspection Date 06/21/89 Type 01 Inspector I.D. # 2149 # Violation
 Comment ROUTINE

Permit Expiration Date _____ Quarterly Groundwater Due Date _____ Days/Week Operated _____
 Repermit Date _____ Annual Groundwater Due Date _____ Max. Daily Volume _____

1 = No Violation Observed

2 = Not Applicable

3 = Not Determined

4 = Non-Compliance

Chapter Citation
 25 Pa Code §

Requirement

Status
 1 2 3 4 Line
 Number

CLOSED**GENERAL PROVISIONS**

273.201(c)(2)	Operation in accordance with approved plans and permit.					001
273.201(c)(2)	Operation within permit boundaries (vertical and horizontal).					002 •
273.201(c)(2)	Disposal timing and sequence as per Section 273.112(1)					003 •
273.201(d)-(g)	No unapproved wastes or liquids.					004 •
273.202(a)(1)-(13)	Isolation distances are adhered to.					005
273.203(a), (b)	Facilities certification requirements followed.					006
273.203(c)	Written Department approval of new construction prior to waste disposal.					007

DAILY OPERATIONS

273.211(a)	Proper signs posted.					008
273.211(b)-(d)	Site perimeter clearly marked and grid coordinate system in use.					009
273.212(a)-(c)	Proper barriers installed and access controlled when attendant not present.					010
273.213(a)-(k)	Access road maintained in accordance with Chapter 105 and 273, and negotiable by vehicles.					011

Inspection Report Comments

Date of Inspection 6-21-89 Identification Number 100550Company/Facility/Site Name Boyertown Landfill

Permission to inspect the facility was given by Mr. John Kessler.

- The landfill is closed.

- Several bare spots were noted on the landfill during the inspection. According to Mr. Kessler, these areas will be seeded this summer.

The Sedimentation Basin needs to be cleaned out. This should be done as soon as possible.

The gas flare was operating at the time of the inspection.

In the "Requirement" Section of this inspection report, each listed inspection item may provide only a brief version of its corresponding obligation as described in the body of the regulations. Please use the Chapter citations listed on this inspection report as a reference to obtain a detailed description of compliance requirements.

This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Waste Management, inspected the above installation. The findings of this inspection are shown in this report. This inspection report shall serve as a formal notification (Notice of Violation) of any violations which were observed during the inspection. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Additional notification may be forthcoming, concerning any violations indicated herein and listing any additional violations.

This report does not constitute an order or other appealable action of the Department. Nothing contained herein shall be deemed to grant or imply immunity from legal action for any violation noted herein.

Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.

Person Interviewed (signature) _____

Date _____

Inspector (signature) Meg MustardDate 6/21/89

Page ____ of ____

Hazardous Waste Inspection Report Generators – Part A

EPA

145096

GEN/TSD

Date of inspection 2-8-89 Time start _____ Time finish _____
Name of inspector Neg Mustard
Company, installation name Bayertown Sanitary Landfill
Location 300 Merkel Rd, Cillbertsville, PA 19525
County Montgomery Municipality Douglas Twp
Identification number PAD 04860.3005
Name of responsible official Warren Frame
Title Pres.
Mailing address RD #1, Box 3100 Glenmoor, PA 19343
Area code and telephone number (215) 458-5300
Name of person interviewed John Kersley
Title _____
Mailing address (if different from above) Same
Area code and telephone number Same

1. Current waste handling method:

- | | | | | | |
|----|--|--|--|--|----------------------------------|
| a. | <input checked="" type="checkbox"/> On-site | <input checked="" type="checkbox"/> treatment, | <input checked="" type="checkbox"/> storage, | <input type="checkbox"/> disposal | <input type="checkbox"/> PBR |
| b. | <input type="checkbox"/> On-site | <input type="checkbox"/> use, | <input type="checkbox"/> reuse, | <input type="checkbox"/> recycle, | <input type="checkbox"/> reclaim |
| c. | <input checked="" type="checkbox"/> Off-site | <input checked="" type="checkbox"/> treatment, | <input type="checkbox"/> storage, | <input checked="" type="checkbox"/> disposal | |
| d. | <input type="checkbox"/> Off-site | <input type="checkbox"/> use, | <input type="checkbox"/> reuse, | <input type="checkbox"/> recycle, | <input type="checkbox"/> reclaim |

2. Amount of hazardous waste produced:

- a. _____ kg./mo.
- b. _____ kg./yr.

[illegible][illegible]

Hazardous Waste Inspection Report
Comments - Part C

Date of Inspection 2-8-89 Identification Number PAD048603005
Company, Installation Name Boyetown Sanitary Landfill
County Montgomery Municipality Douglas Twp

Permission to inspect facility given by Mr. John Kessler.

Leachate levels in lagoons were below the two (2) foot level.

The sludge in the aeration shed is due to be cleaned out - according to Mr. Kessler.

John Kessler or Warren Frame inspect the treatment facility 3X's per day.

This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Waste Management, inspected the above installation. The findings of this inspection are shown in this report. Any violations which were uncovered during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Notification will be forthcoming, confirming any violations indicated herein and listing any additional violations.

Person Interviewed (signature) _____ Date _____
Inspector (signature) Meg Mustard Date 2-10-89

Hazardous Waste Inspection Report
TSD Facilities - Part A

Date of inspection 2-8-89 Time start _____ Time finish _____
Name of inspector Meg Mustard
Company, installation name Baytown Landfill
Location 300 Merkel Road Gilbertsville, PA 19525
County Montgomery Municipality Douglas Twp
Identification number PAD 048603005
Name of responsible official Warren Frame
Title President
Mailing address RD #1 Box 360 Glenmoor, PA 19343
Area code and telephone number (215) 458-5300
Name of person interviewed John Kessler
Title _____
Mailing address (if different from above) Same
Area code and telephone number Same

1. Site characterization:

- | | | | | |
|--|--|--|---|--|
| a. <input checked="" type="checkbox"/> Treatment | - <input checked="" type="checkbox"/> surface impoundments | <input checked="" type="checkbox"/> chemical | <input type="checkbox"/> physical | <input checked="" type="checkbox"/> biological |
| b. <input type="checkbox"/> Storage | - <input type="checkbox"/> containers | <input type="checkbox"/> tanks | <input type="checkbox"/> surface impoundments | <input type="checkbox"/> waste piles |
| c. <input checked="" type="checkbox"/> Disposal | - <input type="checkbox"/> land treatment | <input type="checkbox"/> landfill | <input type="checkbox"/> incineration | <input type="checkbox"/> thermal treatment |
| d. <input type="checkbox"/> Use | <input type="checkbox"/> reuse | <input type="checkbox"/> recycle | <input type="checkbox"/> reclaim | |

2. Does the facility generate hazardous wastes? ☒ Yes ☐ No

3. Types of hazardous waste produced by Hazardous Waste Number:

4. Are hazardous wastes transported off-site by the facility? ☐ Yes ☒ No

Hazardous Waste Inspection Report TSD Facilities – Landfills

[illegible]

[illegible]

Hazardous Waste Inspection Report
Comments - Part C

Date of Inspection 2-8-89 Identification Number PA0048603005
Company, Installation Name Boyertown Landfill
County Montgomery Municipality Douglas Township

Permission to inspect facility given by Mr. John Kessler.

- Leachate levels of lagoons were below the two (2) foot level.

The raw leachate lagoon was high due to recent rains, according to Mr. Kessler.

Closure of this lagoon should be addressed on a Hazardous Waste Part B application will have to be submitted to the Department.

When one of the small treated wastewater lagoons is $3/4$ full, the treated water is tested by RMC for various parameters.

When the lagoon is full, it is discharged at $13\frac{1}{2}$ gal/min to BMMMA. It takes approximately 4-5 days to empty one lagoon. While the one lagoon is being discharging, the other lagoon is being filled.

The pH of the treated water was 7.0 at the time of the inspection.

This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Waste Management, inspected the above installation. The findings of this inspection are shown in this report. Any violations which were uncovered during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Notification will be forthcoming, confirming any violations indicated herein and listing any additional violations.

Person Interviewed (signature) Meg Mustard Date 2-10-89
Inspector (signature) Meg Mustard Date 2-10-89

18097
SUBJECT: RCRA Inspection - Bayertown Sanitary Landfill - Gilbertsville, Pa.
PAD 048603005

DATE: 3/31/89

FROM: *gk* Gregory A. Koltonuk, [REDACTED]
RCRA Enforcement Section (3HW) 15

To: File

Thru: VICKY BINETTI, CHIEF - RCRA Enforcement Section, 3HW 15
mt 3/31/89

gan
TSD

BASED UPON A REVIEW OF THE RCRA INSPECTION REPORT FOR THE FACILITY
REFERENCED ABOVE, I HAVE DETERMINED THAT NO FURTHER ACTION IS
REQUIRED AT THIS TIME.

EPA

Hazardous Waste Inspection Report
Generators — Part ADate of inspection 9-15-88 Time start _____ Time finish _____Name of inspector Meg MustardCompany, installation name Boyertown Sanitary LandfillLocation 300 Merkel Rd, Gilbertsville, PA 19525County Montgomery Municipality Douglas TwpIdentification number PAD048603005Name of responsible official Michael MillerTitle V.P.Mailing address SameArea code and telephone number (215) 367-1300Name of person interviewed Michael Miller

Title _____

Mailing address (if different from above) _____

Area code and telephone number _____

1. Current waste handling method:

- | | | | | | |
|----|--|--|--|--|----------------------------------|
| a. | <input checked="" type="checkbox"/> On-site | <input checked="" type="checkbox"/> treatment, | <input checked="" type="checkbox"/> storage, | <input type="checkbox"/> disposal | <input type="checkbox"/> PBR |
| b. | <input type="checkbox"/> On-site | <input type="checkbox"/> use, | <input type="checkbox"/> reuse, | <input type="checkbox"/> recycle, | <input type="checkbox"/> reclaim |
| c. | <input checked="" type="checkbox"/> Off-site | <input checked="" type="checkbox"/> treatment, | <input type="checkbox"/> storage, | <input checked="" type="checkbox"/> disposal | |
| d. | <input type="checkbox"/> Off-site | <input type="checkbox"/> use, | <input type="checkbox"/> reuse, | <input type="checkbox"/> recycle, | <input type="checkbox"/> reclaim |

2. Amount of hazardous waste produced:

a. _____ kg./mo.

b. _____ kg./yr.

3. Types of hazardous waste produced by Hazardous Waste Number:

4. Are hazardous wastes transported off-site by the generator? ☐ Yes ☒ No

Hazardous Waste Inspection Report
Comments - Part C

Date of Inspection 9-15-88 Identification Number PA0048603005
Company, Installation Name Boyetown Landfill
County Montgomery Municipality Douglas Twp

- Permission to inspect facility given by Michael Miller
- Onsite with Kristine Combata

Leachate levels in lagoons were below
the two (2) foot level.

- Level in the raw leachate lagoon was
higher than usual due to power feeding
caused by a storm. This storm caused
the treatment plant to be out of
commission during the month of
~~August~~ July.

This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Waste Management, inspected the above installation. The findings of this inspection are shown in this report. Any violations which were uncovered during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Notification will be forthcoming, confirming any violations indicated herein and listing any additional violations.

Person Interviewed (signature) _____

Date _____

Inspector (signature) Meg Mustard

Date 9/15/88

EPA

Hazardous Waste Inspection Report
TSD Facilities - Part A

Date of inspection 9-15-88 Time start _____ Time finish _____
Name of inspector Meg Mustard
Company, installation name J. Boyertown Landfill
Location 300 Merkel Road, Gilbertsville, PA 19525
County Montgomery Municipality Douglas Twp
Identification number PA06048603005
Name of responsible official Michael Miller
Title V.P.
Mailing address Same
Area code and telephone number (215)-367-1300
Name of person interviewed Michael Miller
Title _____
Mailing address (if different from above) _____
Area code and telephone number _____

1. Site characterization:

- | | | | |
|---|--|---|--|
| a. <input checked="" type="checkbox"/> Treatment - <input checked="" type="checkbox"/> surface impoundments | <input checked="" type="checkbox"/> chemical | <input type="checkbox"/> physical | <input checked="" type="checkbox"/> biological |
| b. <input type="checkbox"/> Storage - <input type="checkbox"/> containers | <input type="checkbox"/> tanks | <input type="checkbox"/> surface impoundments | <input type="checkbox"/> waste piles |
| c. <input checked="" type="checkbox"/> Disposal - <input type="checkbox"/> land treatment | <input type="checkbox"/> landfill | <input type="checkbox"/> incineration | <input type="checkbox"/> thermal treatment |
| d. <input type="checkbox"/> Use <input type="checkbox"/> reuse | <input type="checkbox"/> recycle | <input type="checkbox"/> reclaim | |

2. Does the facility generate hazardous wastes? ☒ Yes ☐ No

3. Types of hazardous waste produced by Hazardous Waste Number:

4. Are hazardous wastes transported off-site by the facility? ☐ Yes ☒ No

[illegible]

[illegible]

Inspection Report Comments

Date of Inspection 9-15-88 Identification Number PAD 048603005
Company/Facility/Site Name Bayertown Landfill

Permission to inspect facility given by
Michael Miller. On site with R. Combs.

Leachate levels in lagoons were below the
two (2) foot level

The treatment facility is able to treat wastewater
12 gal/min but can only discharge 12 gal/minute
to the POTW.

pH of effluent - 6.4

Fill and empty lagoon - 1 week

In the "Requirement" Section of this inspection report, each listed inspection item may provide only a brief version of its corresponding obligation as described in the body of the regulations. Please use the Chapter citations listed on this inspection report as a reference to obtain a detailed description of compliance requirements.

This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Waste Management, inspected the above installation. The findings of this inspection are shown in this report. Any violations which were observed during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Notification may be forthcoming, confirming any violations indicated herein and listing any additional violations.

This report does not constitute an order or other appealable action of the Department. Nothing contained herein shall be deemed to grant or imply immunity from legal action for any violation noted herein.

Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.

Person Interviewed (signature) _____

Date _____

Inspector (signature) _____

Meg Mustard

Date _____

9/15/88

Page ____ of ____

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

Region III - New York, New Jersey, and Pennsylvania

Philadelphia, Pennsylvania 19106

18098

SUBJECT: RCRA Inspection - *Bayertown Sanitary Disposal - Gilbertsville, Pa.*
PAD 048603005

DATE: *2/24/89*

FROM: *gk* Gregory A. Koltonuk, [REDACTED]
RCRA Enforcement Section (3H/15)

TSD

TO: File

Thru: Vicky Binetti, Chief - RCRA Enforcement Section, 3H/15

TSD/gk

THE STATE IS TAKING ACTION TO RESOLVE THE VIOLATIONS IN THIS
INSPECTION REPORT.

WE WILL MONITOR THE STATE ACTIVITY REGARDING RESOLUTION OF THESE
VIOLATIONS.

What is state doing, given "no abatement" report (p. 3)?

5-26-88
Date Prepared

Commonwealth of Pennsylvania
Department of Environmental Resources
Bureau of Solid Waste Management

Hazardous Waste Management

I.D. Number

Inspection Compliance Checklist for a Facility Which
May Be Affecting Ground-Water Quality
(Form 5)

Facility Name BOYERTOWN SANITARY DISPOSAL Facility Permit Number PADER 100500
County MONTGOMERY Municipality GILBERTSVILLE
Company Address 300 MERKEL RD. Inspector's Name PANTELIDOU
19525
Company Contact/Official MICHAEL MILLER Branch/Organization BSD, INC.
VICE PRESIDENT Date of Inspection 5-25-88

Type of facility: (check appropriately)

Yes No Unknown

- a) surface impoundment
- b) landfill
- c) land treatment facility
- d) disposal waste pile

✓
✓
 ✓
 ✓

1. Have comparisons of ground-water contamination indicator parameters (75.265(n)(8)(iii)) for the upgradient well(s) shown a significant increase (or pH decrease as well) over initial background? 75.265(n)(14)(i)

✓

- a) If "Yes", has this information been submitted to the Department according to 75.265(n)(18)(ii)(B)?

✓

2. Have comparisons of indicator parameters for the downgradient wells (75.265(n)(8)(iii)) shown a significant increase (or pH decrease as well) over initial background? 75.265(n)(14)(ii)

✓

- a) If "Yes", were additional ground-water samples taken for those downgradient wells where the significant difference was determined? 75.265(n)(14)(ii)

✓

- 1) Were samples split in two?

✓

- 2) Was the significant difference due to human (e.g., laboratory) error? If "Yes", do not continue.

✓

	<u>Yes</u>	<u>No</u>	<u>Unknown</u>
3. If significant differences were not due to error, was a written notice sent to the Department within 7 days of confirmation? 75.265(n)(15)	<u>✓</u>	_____	_____
4. Within 30 days of notification of the Department, was a certified ground-water quality assessment plan, based on the outline required by 75.265(n)(13), developed and submitted for approval? 75.265(n)(15)(i)	<u>✓</u>	_____	_____
a) Does the plan specify 75.265(n)(15)(ii):			
1) well information (specifics)	<u>✓</u>	_____	_____
(a) number?	<u>✓</u>	_____	_____
(b) locations?	<u>✓</u>	_____	_____
(c) size?	<u>✓</u>	_____	_____
(d) depths?	<u>✓</u>	_____	_____
2) sampling methods?	<u>✓</u>	_____	_____
3) analytical methods?	<u>✓</u>	_____	_____
4) evaluation procedures?	<u>✓</u>	_____	_____
5) abatement procedures?	<u>✓</u>	_____	_____
6) schedule of implementation?	<u>✓</u>	_____	_____
b) Does the plan allow for determination of 75.265(n)(15)(iii):			
1) Rate and extent of migration of hazardous waste or hazardous waste constituents in the ground water?	<u>✓</u>	_____	_____
2) Concentrations of the hazardous waste or hazardous waste constituents in the ground water?	<u>✓</u>	_____	_____
c) Is it indicated that the first determination was made as soon as technically feasible? 75.265(n)(15)(iv)	<u>✓</u>	_____	_____
1) Within 15 days after the first determination, was a written report containing the assessment of ground-water quality submitted to the Department?	<u>✓</u>	_____	_____

	<u>Yes</u>	<u>No</u>	<u>Unknown</u>
d) Was it determined that hazardous waste or hazardous waste constituents from the facility have entered the ground water?	<u>✓</u>	<u> </u>	<u> </u>
1) If "No", was the original indicator evaluation program, required by 75.265(n)(7) - 75.265(n)(12) and 75.265(n)(14), reinstated?	<u>N/A</u>	<u> </u>	<u> </u>
a) Was the Department notified of the reinstatement of program within 15 days of the determination? 75.265(n)(15)(v)	<u>N/A</u>	<u> </u>	<u> </u>
e) If it was determined that hazardous waste or hazardous waste constituents have entered the ground water (75.265(n)(15)(vi)):			
1) For facilities where the program was implemented prior to final closure, are determinations of hazardous waste or hazardous waste constituents continued on a quarterly basis?	<u>✓</u>	<u> </u>	<u> </u>
(If the program was implemented during the post-closure care period, determinations made in accordance with the ground-water quality assessment plan may cease after the first determination.)			
(a) Were subsequent ground-water quality reports submitted to the Department within 15 days of determination?	<u>✓</u>	<u> </u>	<u> </u>
(b) Has an approvable abatement plan, to be used to abate the ground-water contamination, been developed and submitted to the Department?	<u>✓</u>	<u> </u>	<u> </u>
2) Were records kept of the analyses and evaluations, specified in the ground-water quality assessment (throughout the active life of the facility)? 75.265(n)(19)(i)	<u>✓</u>	<u> </u>	<u> </u>
(a) If a disposal facility, were(are) records kept throughout the post-closure period as well?	<u>N/A</u>	<u> </u>	<u> </u>
f) Are annual reports being submitted to the Department by January 31, which contain the results of the ground-water quality assessment program? 75.265(n)(19)(ii)	<u>✓</u>	<u> </u>	<u> </u>
1) Do the reports include the calculated or measured rate of migration of hazardous waste or hazardous waste constituents in the ground water during the reporting period?	<u> </u>	<u>✓*</u>	<u> </u>
2) Do the reports include the measured volumes of hazardous waste or hazardous waste constituents removed from ground water using the abatement procedures specified in 75.265(n)(15)(vi)(C)?	<u> </u>	<u>✓*</u>	<u> </u>

* analysis of assessment was submitted in 1984. No abatement other than pumping of well #1 and treatment of some leachate; also pumping of hazardous waste leachate sump.

Commonwealth of Pennsylvania
Department of Environmental Resources
Bureau of Solid Waste Management

5-26-88
Date Prepared

Hazardous Waste Management

I.D. Number

Inspection Compliance Checklist for a Facility Which
May Be Affecting Ground-Water Quality
(Form 5)

Facility Name BOYERTOWN SANITARY DISPOSAL Facility Permit Number PADER 100500
County MONTGOMERY Municipality GILBERTSVILLE
Company Address 300 MERKEL RD. Inspector's Name PANTELIDOU
19525
Company Contact/Official MICHAEL MILLER Branch/Organization BSD, INC.
VICE PRESIDENT Date of Inspection 5-25-88

Type of facility: (check appropriately)

Yes No Unknown

- a) surface impoundment
b) landfill
c) land treatment facility
d) disposal waste pile

☒ ☐ ☐
☒ ☐ ☐
☐ ☒ ☐
☐ ☒ ☐

1. Have comparisons of ground-water contamination indicator parameters (75.265(n)(8)(iii)) for the upgradient well(s) shown a significant increase (or pH decrease as well) over initial background? 75.265(n)(14)(i)

☒ ☐ ☐
☒ ☐ ☐

- a) If "Yes", has this information been submitted to the Department according to 75.265(n)(18)(ii)(B)?

☒ ☐ ☐

2. Have comparisons of indicator parameters for the downgradient wells (75.265(n)(8)(iii)) shown a significant increase (or pH decrease as well) over initial background? 75.265(n)(14)(ii)

☒ ☐ ☐

- a) If "Yes", were additional ground-water samples taken for those downgradient wells where the significant difference was determined? 75.265(n)(14)(ii)

☒ ☐ ☐

- 1) Were samples split in two?

☒ ☐ ☐

- 2) Was the significant difference due to human (e.g., laboratory) error? If "Yes", do not continue.

☒ ☐ ☐

	<u>Yes</u>	<u>No</u>	<u>Unknown</u>
3. If significant differences were not due to error, was a written notice sent to the Department within 7 days of confirmation? 75.265(n)(15)	<u>✓</u>	<u> </u>	<u> </u>
4. Within 30 days of notification of the Department, was a certified ground-water quality assessment plan, based on the outline required by 75.265(n)(13), developed and submitted for approval? 75.265(n)(15)(i)	<u>✓</u>	<u> </u>	<u> </u>
a) Does the plan specify 75.265(n)(15)(ii):			
1) well information (specifics)	<u>✓</u>	<u> </u>	<u> </u>
(a) number?	<u>✓</u>	<u> </u>	<u> </u>
(b) locations?	<u>✓</u>	<u> </u>	<u> </u>
(c) size?	<u>✓</u>	<u> </u>	<u> </u>
(d) depths?	<u>✓</u>	<u> </u>	<u> </u>
2) sampling methods?	<u>✓</u>	<u> </u>	<u> </u>
3) analytical methods?	<u>✓</u>	<u> </u>	<u> </u>
4) evaluation procedures?	<u>✓</u>	<u> </u>	<u> </u>
5) abatement procedures?	<u>✓</u>	<u> </u>	<u> </u>
6) schedule of implementation?	<u>✓</u>	<u> </u>	<u> </u>
b) Does the plan allow for determination of 75.265(n)(15)(iii):			
1) Rate and extent of migration of hazardous waste or hazardous waste constituents in the ground water?	<u>✓</u>	<u> </u>	<u> </u>
2) Concentrations of the hazardous waste or hazardous waste constituents in the ground water?	<u>✓</u>	<u> </u>	<u> </u>
c) Is it indicated that the first determination was made as soon as technically feasible? 75.265(n)(15)(iv)	<u>✓</u>	<u> </u>	<u> </u>
1) Within 15 days after the first determination, was a written report containing the assessment of ground-water quality submitted to the Department?	<u>✓</u>	<u> </u>	<u> </u>

	<u>Yes</u>	<u>No</u>	<u>Unknown</u>
d) Was it determined that hazardous waste or hazardous waste constituents from the facility have entered the ground water?	<u>✓</u>	<u> </u>	<u> </u>
1) If "No", was the original indicator evaluation program, required by 75.265(n)(7) - 75.265(n)(12) and 75.265(n)(14), reinstated?	<u>N/A</u>	<u> </u>	<u> </u>
a) Was the Department notified of the reinstatement of program within 15 days of the determination? 75.265(n)(15)(v)	<u>N/A</u>	<u> </u>	<u> </u>
e) If it was determined that hazardous waste or hazardous waste constituents have entered the ground water (75.265(n)(15)(vi)):			
1) For facilities where the program was implemented prior to final closure, are determinations of hazardous waste or hazardous waste constituents continued on a quarterly basis?	<u>✓</u>	<u> </u>	<u> </u>
(If the program was implemented during the post-closure care period, determinations made in accordance with the ground-water quality assessment plan may cease after the first determination.)			
(a) Were subsequent ground-water quality reports submitted to the Department within 15 days of determination?	<u>✓</u>	<u> </u>	<u> </u>
(b) Has an approvable abatement plan, to be used to abate the ground-water contamination, been developed and submitted to the Department?	<u>✓</u>	<u> </u>	<u> </u>
2) Were records kept of the analyses and evaluations, specified in the ground-water quality assessment (throughout the active life of the facility)? 75.265(n)(19)(i)	<u>✓</u>	<u> </u>	<u> </u>
(a) If a disposal facility, were (are) records kept throughout the post-closure period as well?	<u>N/A</u>	<u> </u>	<u> </u>
f) Are annual reports being submitted to the Department by January 31, which contain the results of the ground-water quality assessment program? 75.265(n)(19)(ii)	<u>✓</u>	<u> </u>	<u> </u>
1) Do the reports include the calculated or measured rate of migration of hazardous waste or hazardous waste constituents in the ground water during the reporting period?	<u> </u>	<u>✓*</u>	<u> </u>
2) Do the reports include the measured volumes of hazardous waste or hazardous waste constituents removed from ground water using the abatement procedures specified in 75.265(n)(15)(vi)(C)?	<u> </u>	<u>✓*</u>	<u> </u>

* analysis of assessment was submitted in 1984. No abatement other than pumping of well and treatment of some leachate; also pumping of hazardous waste leachate

TSD
PA

18099

STANDARD FORM NO. 64

SUBJECT: RCRA Inspection - Boyertown Sanitary Landfill - Gilbertsville, Pa. DATE:
PAD 048603005

FROM: gk Gregory A. Koltonuk, [REDACTED]
RCRA Enforcement Section (3HW 15)

TO: File

THRU: Vicky Binetti, ^{app 8/19/88} CHIEF - RCRA ENFORCEMENT SECTION, 3HW 15

BASED UPON A REVIEW OF THE RCRA INSPECTION REPORT FOR THE FACILITY
REFERENCED ABOVE, I HAVE DETERMINED THAT NO FURTHER ACTION IS
REQUIRED AT THIS TIME.

Hazardous Waste Inspection Report
Generators - Part A

Date of inspection 3/25/88 Time start Time finish
Name of inspector KRISTINE GOMBITA
Company, installation name BOYERTOWN SANITARY LANDFILL
Location 300 Merkel Road, Gilbertsville, PA
County Montgomery Municipality Douglas Twp
Identification number PADO48603005
Name of responsible official Michael Miller
Title V.P.
Mailing address above
code and telephone number
Name of person interviewed Roger Kravt
Title Foreman
Mailing address (if different from above)
Area code and telephone number

1. Current waste handling method:

- | | | | | | |
|----|--|--|--|--|----------------------------------|
| a. | <input checked="" type="checkbox"/> On-site | <input checked="" type="checkbox"/> treatment, | <input checked="" type="checkbox"/> storage, | <input type="checkbox"/> disposal | <input type="checkbox"/> PBR |
| b. | <input type="checkbox"/> On-site | <input type="checkbox"/> use, | <input type="checkbox"/> reuse, | <input type="checkbox"/> recycle, | <input type="checkbox"/> reclaim |
| c. | <input checked="" type="checkbox"/> Off-site | <input checked="" type="checkbox"/> treatment, | <input type="checkbox"/> storage, | <input checked="" type="checkbox"/> disposal | |
| d. | <input type="checkbox"/> Off-site | <input type="checkbox"/> use, | <input type="checkbox"/> reuse, | <input type="checkbox"/> recycle, | <input type="checkbox"/> reclaim |

2. Amount of hazardous waste produced:

- a. kg./mo.
b. kg./yr.

3. Types of hazardous waste produced by Hazardous Waste Number:

4. Are hazardous wastes transported off-site by the generator? ☐ Yes ☒ No

Hazardous Waste Inspection Report Generators – Part B

1—Non-Compliance, 2—Compliance, 3—Not Applicable, 4—Not Determined					
Compliance Status				Requirement	Chapter Citation
1	2	3	4		75.262
	X			Identification number	(c)(1)
			X	Hazardous waste shipments offered only to licensed transporters	(c)(4)
			X	Authorization received from TSD facility for wastes shipped off-site	(d)
			X	PA manifest used for intrastate shipments	(e)(2)
			X	Disposer state manifest or EPA format manifest used for out-of-state shipments	(e)(3)
			X	Manifests filled out properly and completely	(e)(7)
			X	Manifests routed properly and within time limits (7 days)	(e)(14) or (15)
	X			Proper U.S. DOT shipping containers or packages	(f)(1)(i)
		X		Shipping containers marked and labeled according to U.S. DOT	(f)(1)(ii)
		X		Containers of 110 gal. or less marked with required PA label	(f)(1)(iii)
			X	Placards offered to transporter	(f)(2)
	X			Wastes accumulated on-site for less than 90 days	(g)(1)(i)
		X		Wastes stored in proper containers and properly marked and labeled	(g)(1)(ii)
		X		Containers managed in accordance with 75.265(q)(1)–(9)	(g)(1)(iii)
		X		Containers clearly marked with accumulation date and visible for inspection	(g)(1)(iv)
			X	Records retained at designated location for 20 years	(h)
			X	Quarterly reports submitted to the Department	(i)
			X	Exception reporting procedures followed	(j)
			X	Hazardous waste disposal plan, if required	(l)
		X		Spill reporting procedures followed	(m)(1)
		X		Preparedness, Prevention and Contingency Plan and implemented	(m)(5)
		X		Special requirements followed for international shipments	(o)
		X		On the job or classroom personnel training program [75.265(f)]	(g)(1)(6)
		X		Drum accumulation area inspected & inspection logged weekly as per 75.265(q)(5)	(g)(1)(iii)

Hazardous Waste Inspection Report
Comments - Part C

Date of Inspection 3/25/88 Identification Number PA0048603005
Company, Installation Name BOYERTOWN LANDFILL
County MONTGOMERY Municipality DALLAS TWP

Permission to inspect facility given by Roger Krut.

The facility is in compliance

Note: Leachate levels in lagoons well below 2 feet level

This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Waste Management, inspected the above installation. The findings of this inspection are shown in this report. Any violations which were uncovered during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Notification will be forthcoming, confirming any violations indicated herein and listing any additional violations.

Person Interviewed (signature) _____

Date _____

Inspector (signature) _____

Date 3/25/88

Hazardous Waste Inspection Report
TSD Facilities - Part A

Date of inspection 3/25/88 Time start _____ Time finish _____
Name of inspector KRISTINE GOMBATI
Company, installation name BOYERTOWN LANDFILL
Location 300 MERKEL ROAD, GILBERTSVILLE, PA
County MONTGOMERY Municipality DOUGLASS TWP.
Identification number PAD048603005
Name of responsible official MICHAEL MILLER
Title V.P.
Mailing address 300 Merkel Road, Gilbertsville
Area code and telephone number 215-367-1300
Name of person interviewed Roger Kraft
Title Foreman
Mailing address (if different from above) _____
Area code and telephone number _____

1. Site characterization:

- a. ☒ Treatment - ☒ surface impoundments ☒ chemical ☐ physical ☒ biological
b. ☐ Storage - ☐ containers ☐ tanks ☐ surface impoundments ☐ waste piles
c. ☒ Disposal - ☐ land treatment ☐ landfill ☐ incineration ☐ thermal treatment
d. ☐ Use ☐ reuse ☐ recycle ☐ reclaim

2. Does the facility generate hazardous wastes? ☒ Yes ☐ No

3. Types of hazardous waste produced by Hazardous Waste Number:

4. Are hazardous wastes transported off-site by the facility? ☐ Yes ☒ No

Hazardous Waste Inspection Report

TSD Facilities – Landfills

1-Non-Compliance, 2-Compliance, 3-Not Applicable, 4-Not Determined

[illegible]

COMPLIANCE STATUS				REQUIREMENT	CHAPTER CITATION
1	2	3	4		
X				Surface impoundment managed to maintain at least 60 cm (2 ft) of freeboard and to prevent overtopping of the dike by overfilling, wave action, or a storm.	(s) (2)
X				Protective cover on earthen dikes, such as suitable vegetation, rock rip-rap, or non-erodible material to minimize wind and water erosion.	(s) (3)
		X		Waste analyses and/or trial tests conducted on hazardous wastes substantially different from wastes previously treated or stored; or chemically treat hazardous waste with a substantially different process than any previously used in that tank.	(s) (4)
X				Precautions taken for surface impoundments holding ignitable, reactive, or incompatible wastes.	(s) (5)
X				Freeboard level inspected once each operating day.	(s) (6), (i)
X				Surface impoundment, including dikes and vegetation surrounding the dike, inspected once a week.	(s) (6), (ii)
X				Closure and post closure requirements are complied with.	(s) (7) (8) (9)
X				Placement of ignitable or reactive waste only with Department's approval.	(s) (10)
X				Precautions taken for handling ignitable, reactive, or incompatible material	(s) (11)
				<u>Comments</u>	
				All items in compliance at time of inspection.	
				Freeboard level on raw leachate surface	
				impoundment is well below the 2 foot minimum.	
				Kate K. Garbitt 3/25/88.	

SUBJECT: RCRA Inspection - BOYERTOWN SDC - GILBERTSVILLE, PA
PAD 048603005

18100
DATE: 11/20/87

Re: Gregory A. Koltonuk, Environmental Scientist
PA-RCRA Enforcement Section (3HW11)

File

Re: JOSEPH KOTLINSKI
Robert W. Schaul, Chief *JK*
PA-RCRA Enforcement Section (3HW11)

BASED UPON A REVIEW OF THE RCRA INSPECTION REPORT FOR THE FACILITY
REFERENCED ABOVE, I HAVE DETERMINED THAT NO FURTHER ACTION IS
REQUIRED AT THIS TIME.

HAZARDOUS WASTE INSPECTION REPORT
TSD Facilities - Part A

Rec'd
11/13/87
gk

Date of inspection 10/27/87 Time start _____ Time finish _____
Name of inspector KRISTINE GOMBITA
Company, installation name BOYERTOWN LANDFILL
Location 300 MERKEL ROAD, GILBERTSVILLE
County MONTGOMERY Municipality DOUGLAS TWP.
Identification number ~~PA0048603005~~ PA0048603005
Name of responsible official MICHAEL MILLER
Title V.P.
ling address 300 MERKEL RD, GILBERTSVILLE, PA
Area code and phone no. 215-367-000
Name of person interviewed Roger Krout
Title Foreman
Mailing address (if different from above) Same
Area code and phone no. Same

1. Site characterization:

- a. ☒ Treatment - ☒ surface impoundments, ☒ chemical, ☐ physical, ☒ biological
b. ☐ Storage - ☐ containers, ☐ tanks, ☐ surface impoundments, ☐ waste piles
c. ☒ Disposal - ☐ land treatment, ☐ landfill, ☐ incineration, ☐ thermal treatment
d. ☐ Use, ☐ reuse, ☐ recycle, ☐ reclaim

2. Does the facility generate hazardous wastes? ☒ Yes ☐ No

3. Types of hazardous waste produced by Hazardous Waste Number:

4. Are hazardous wastes transported off-site by the facility? ☐ Yes ☒ No

[illegible]

75.265

CHAPTER CITATION

REQUIREMENT

(S) (2)

(S) (3)

(S) (4)

(S) (5)

(s) (6) (i)

(s) (6) (ii)

(s) (7) (8)
(9)

(S) (10)

(S) (11)

Comments:

All items in compliance at time of inspection.

Freeboard level on raw leachate surface impoundment is well below 2 foot minimum.

Karl K. Gahrke

10/27/87

HAZARDOUS WASTE INSPECTION REPORT
Generators - Part A

Date of inspection 10/27/87 Time start _____ Time finish _____
Name of inspector KRISTINE GUMBATA
Company, installation name ROYERTOWN SANITARY LANDFILL
Location 300 MERKEL ROAD
County MONTGOMERY Municipality DOUGLAS TWP
Identification number PA0648603005
Name of responsible official MICHAEL MILLER
Ti VICE PRESIDENT
Mailing address 300 MERKEL RD, GILBERTSVILLE, PA
Area code and phone no. _____
Name of person interviewed ROGER KROUT
Title FOREMAN
Mailing address (if different from above) Same
Area code and phone no. Same

1. Current waste handling method:

- a. ☒ On-site ☒ treatment, ☒ storage, ☐ disposal
b. ☐ On-site ☐ use, ☐ reuse, ☐ recycle, ☐ reclaim
c. ☒ Off-site ☒ treatment, ☐ storage, ☒ disposal
d. ☐ Off-site ☐ use, ☐ reuse, ☐ recycle, ☐ reclaim

2. Amount of hazardous waste produced:

- a. _____ kg./mo.
b. _____ kg./yr.

3. Types of hazardous waste produced by Hazardous Waste Number:

4. Are hazardous wastes transported off-site by the generator? ☐ Yes ☒ No

[illegible]

Inspection

10-27-

Identification number

10048603005

Company, Installation name

BOYERTOWN LANDFILL

County

Montgomery

Municipality

DOUGLAS TWP

Permission to inspect given by Roger Kriut.

* The facility is in compliance.

Note:

Leachate levels in lagoons well below 2 feet level.

This inspection report is official notification that a representative of the Department of Environmental Resources, Bureau of Solid Waste Management, inspected the above installation. The findings of this inspection are shown in this report. Any violations which were uncovered during the inspection are indicated. Violations may also be discovered upon examination of the results of laboratory analyses and review of Department records. Notification will be forthcoming, confirming any violations indicated herein and listing any additional violations.

Person Interviewed (signature)

Date

Inspector (signature)

Linda K. Harkle

Date

10/27/87

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

Region III - 6th & Walnut Sts

Philadelphia, PA 19106

1801

SUBJECT: RCRA Inspection - BOYERTOWN SANITARY DISPOSAL CO.
GILBERTSVILLE, PA
PAD 048603005

DATE: 11/4/87

FROM: JK Gregory A. Koltonuk, Environmental Scientist
PA-RCRA Enforcement Section (3HW11)

TO: File
Thru: JOSEPH KOTLINSKI
~~Peter W. Schaul~~, Chief JK
PA-RCRA Enforcement Section (3HW11)

THE STATE IS TAKING ACTION TO RESOLVE THE VIOLATIONS IN THIS
INSPECTION REPORT.

WE WILL MONITOR THE STATE ACTIVITY REGARDING RESOLUTION OF THESE
VIOLATIONS.

(F-wastes)

Greg

- (1) Did DER get a copy of this?
- (2) Have they done anything (NAR) re: the
freeboard violations?

Joe

Media

____ NPDES
____ TSCA
____ ☒ RCRA
____ AIR

Other _____

FY 87 REGION III ESD
INSPECTION TRACKING SYSTEM

Facility Name:

BOYERTOWN SANITARY DISPOSAL
COMPANY (BOYERTOWN LANDFILL)

Type of Inspection (CEI, CSI):

RCRA/CEI

Address:

300 MERKEL ROAD
GILBERTSVILLE, PA
19525

Date of Inspection:

4/28/87

Date of Report:

Permit/ID Number:

PAD648603005

Inspector and Office:

DREW LAUSCH
EPA/CRL

CHECK APPLICABLE

____ Major
____ Municipal
____ Federal
____ ☒ Joint
____ Oversight

____ Minor
____ Industrial

Other _____

Comments: VIOLATIONS: ① FREEBOARD LEVEL NOT INSPECTED EACH DAY IN ANY OF THE THREE (3) SURFACE IMPOUNDMENTS (40 CFR PART 265.226(a)(1)); ② NONE OF THE THREE (3) SURFACE IMPOUNDMENTS ARE INSPECTED AS TO DIKE/VEGETATION STABILITY ON A WEEKLY BASIS (40 CFR PART 265.226(a)(2)); ③ AN INSPECTION LOGBOOK IS NOT MAINTAINED FOR THESE UNITS (40 CFR PART 265.15(d)).

Please sign below to indicate that report is ready for distribution:

X.C. K. - [Signature]

→ ④ ALSO, A MINIMUM OF TWO (2) FEET FREEBOARD IS NOT BEING MAINTAINED IN THE RAW LEACHATE SURFACE IMPOUNDMENT (40 CFR PART 265.222).

OVER →

→ THE FOLLOWING SHOULD BE NOTED:

FACILITY PERSONNEL OPERATE A PARTS REGREASER, LOCATED ON-SITE IN A VEHICLE MAINTAINENCE BLDG. THE TYPE DEGREASANT UTILIZED IS A NON-HALOGENATED SOLVENT ("MINERAL SPIRITS": CAS NO. 64742-48-9). IT IS EST/MATED THAT 45 GALS. OF SPENT SOLVENT ARE GENERATED EACH YEAR.

ACCORDING TO FACILITY REPRESENTATIVES, THE SPENT SOLVENT IS PERIODICALLY EMPTIED INTO A 500 GAL. UNDERGROUND WASTE OIL TANK. FACILITY REPRESENTATIVES EXPLAINED THAT THE WASTE OIL TANK FILLS TO CAPACITY ~~THREE~~ FOUR (4) TIMES A YEAR. AT THESE TIMES, TANK CONTENTS ARE TRANSPORTED OFF-SITE BY A COMPANY CALLED "PETROCON".

THE WASTE OIL WOULD \therefore CONSIST OF $\approx 2.2-2.3\%$ BY VOLUME OF SOLVENT.

RCRA Compliance Evaluation Inspection Report

Boyertown Sanitary Disposal Company, INC
300 Merkel Road
Gilbertsville, PA 19525

RCRA I.D. Number: PAD 048603005

Date of Inspection: April 28, 1987

EPA Representative:

Robert Drew Lausch II
Hydrogeologist

State Representative:

Terry Goodwald
Solid Waste Specialist

Facility Representatives:

Michael P. Miller
Vice-President/General Manager

Roger Krout
Landfill Supervisor

INTRODUCTION

Background

At the request of Region III Headquarters, a RCRA Compliance Evaluation Inspection was conducted at the Boyertown Sanitary Disposal Company, INC (BSD) on April 28, 1987. BSD was last inspected by staff from EPA/CRL on July 29-31, 1986, at which time a RCRA Comprehensive Monitoring Evaluation Inspection was performed.

Purpose

The subject facility was inspected in order to address the following issues:

- ° Landfill cell closure proceedings
- ° Part B permit application status
- ° Landfill expansion proposal
- ° General facility compliance

FACILITY DESCRIPTION

RCRA Activities

BSD is currently operating under interim status as both a generator and TSDF. At this time, the subject facility maintains the following HWMUs:

- ° One (1) 250,000 gallon surface impoundment (raw leachate storage)
- ° Two (2) 100,000 gallon surface impoundments (treated leachate storage)
- ° A leachate treatment system, consisting of several treatment phases:
 - fixed film reactor (submerged trickling filter)
 - clarification
 - filtration
 - air-stripping
 - neutralization
 - activated carbon adsorption

Since May 1984, the landfill at BSD has received only sanitary refuse; however, said landfill continues to be considered a HWMU because hazardous wastes were

disposed in this unit prior to May 1984. According to landfill manager, Roger Krout, as of December 31, 1986, sanitary refuse was no longer placed in the landfill. At the time of this inspection, BSD was in the process of closing the existing landfill. According to Mr. Krout, closure should be completed by Spring/Summer 1987.

BSD plans to increase disposal capacity by creating several landfill cells at areas adjacent to the existing landfill. PVC liner will be installed at the base of the proposed expansion area as well as along the boundary between the existing and proposed landfill cells. Only sanitary refuse will be disposed in the proposed landfill; as a result, said landfill will be managed as a SWMU. Apparently, a separate leachate collection system will also be installed.

Permit Status

Prior to May 1984, hazardous waste consisting of sludges from municipal wastewater treatment plants was disposed at the landfill. Consequently, BSD had intended to permit the landfill as a HWMU. However, the original part B permit application for a hazardous waste landfill was withdrawn as part of a May 1984 consent agreement with PA DER. According to the facility representative, Michael Miller, BSD plans to use as much of the information on the original part B as possible while the remainder will be modified to satisfy the requirements for the facility's leachate treatment system. According to PA DER, the leachate collection system does not qualify for RCRA permit-by-rule status; as a result, must be permitted as a HWMU (Attachment 1). The leachate collection system is the only HWMU included in the part B at the present time.

It is the opinion of BSD that the treated leachate currently stored in the two 100,000 gallon surface impoundments is not a RCRA hazardous waste. Consequently, the subject facility is preparing a delisting petition with

respect to the treated leachate. In order to demonstrate the non-hazardous nature of this waste, BSD is collecting samples of treated leachate and performing analyses for each of the 129 priority pollutants. After a one and one-half (1 1/2) year time period, the results from sampling and analyses will be submitted to PA DER. If the delisting petition is approved, the two surface impoundments would no longer be considered HWMUs; hence, it would not be necessary to include these units in the part B permit application. In the event that leachate is not delisted, BSD would be required to ammend the part B permit application so as to reflect storage of RCRA hazardous waste.

The subject facility intends to close the 250,000 gallon surface impoundment and replace this unit with a below-ground concrete tank. The concrete tank will then be used to store raw leachate for periods of time exceeding 90 days. Closure of the surface impoundment, construction of the concrete storage tank and submission of the part B permit application for leachate treatment will be included under a consent order and agreement between BSD and PA DER (Attachment 1). Although a closure plan will be submitted for the surface impoundment, it should be noted that the unit will not be removed from service. Rather, BSD intends to utilize this surface impoundment for the storage of leachate originating from the landfill expansion site. According to Mr. Miller, the impoundment will be managed as a SWMU.

With respect to compilation of the: (1) landfill expansion proposal, (2) part B permit application and (3) closure and/or post-closure plans, BSD has enlisted the services of the following consultant:

Applied Geotechnical and Environmental
Services Corporation (AGES)
1151 S. Trooper Road
Norristown, PA 19403

INSPECTION OBSERVATIONS

Leachate Treatment System

Depending on the amount of precipitation, an estimated 25-32 million pounds (3-4 million gallons) of raw leachate is generated every year. A majority (nearly 75 percent) of the leachate will be treated on-site prior to being discharged into the Berks-Montgomery Municipal Authority. The remainder is transported off-site as hazardous waste. The leachate treatment system appeared to be managed in accordance with RCRA regulations.

Surface Impoundments

The following violations were observed while conducting both a physical inspection as well as a records review:

- ° Freeboard level in each impoundment is not inspected on a daily basis as per 40 CFR Part 265.226 (a)(1). Furthermore, a minimum of two (2) feet freeboard is not being maintained in the raw leachate surface impoundment (40 CFR Part 265.222).
- ° Weekly inspections of the dike and/or vegetation at each impoundment are not performed as stipulated in 40 CFR Part 265.226 (a)(2).
- ° An inspection logbook is not maintained as required by 40 CFR Part 265.15 (d).

Landfill

At the time of this inspection, the remaining cell of the existing landfill was being closed. Although the sides of the landfill cell had already been graded, facility personnel were still placing dirt/debris on the top portion of this cell. After the entire cell has been completely graded, a final cover comprised of the following will be applied:

- ° Clay base (two feet thick) to minimize infiltration
- ° Overlying top-soil (two feet thick) to provide frost protection

- ° Vegetation to prevent erosion

An erosion control feature (gabion) has recently been constructed at one area near the northeast portion of the landfill. A gabion consists of "rip-rap" (limestone composition), enclosed within a stabilizing galvanized wire mesh, which in turn, is partially bordered by a semi-permeable material ("1199 Fabric" by Amoco, INC). Upon closer inspection, it was discovered that two (2) gabions had been placed immediately adjacent to one another. The estimated dimensions of both gabions were 12 feet (combined width) x 360 feet (length) x 9 inches (depth).

ATTACHMENTS

Additional information has been included on the following RCRA checklists for interim status facilities:

- ° Generator
- ° TSDF
- ° Surface Impoundment
- ° Landfill
- ° Chemical/Physical/Biological Treatment

RCRA CHECKLIST FOR INSPECTION OF GENERATORS

Name of Facility: BOYERTOWN SANITARY
DISPOSAL COMPANY, INC.

Address: 300 MERKEL ROAD

GILBERTSVILLE, PA 19525

EPA Generator ID Number: PAD040603005

Facility Inspection Representative: M. MILLER

Title: VICE-PRES / GENERAL MGR

Telephone Number: 215-367-1300

NO USE

Inspection file

No. _____

Reviewer _____

Date Reviewed: _____

Form "A"

Pert. Regs.
40 C.F.R.

1. Please provide a brief narrative explaining the type of work activity that occurs at the generator.

DISPOSAL OF MUNICIPAL WASTES
(I.E. SANITARY REFUSE)

2. Does the generator dispose of its wastes....

A. On-site

(Circle one)

B. Off-Site

Note: If on-site, then checklist for both a generator and TSD facility must be completed; if on-site more than 90 days.

3. Are 1000 kg (2200 Lbs) or more of hazardous waste produced by the generator facility in a month? (If the amount is less than 1,000 kg/month, then the facility qualifies as a small generator and Form C should be completed instead of Form A.)

☒ Yes ☐ No

4. What categories of hazardous wastes result from the generator's facility?

A. Ignitable wastes

☒ Yes ☐ No

B. Reactive wastes

☒ Yes ☐ No

C. Corrosive wastes

☒ Yes ☐ No

D. EP Toxic wastes

☒ Yes ☐ No

E. RCRA Listed Wastes

☒ Yes ☐ No

(SEE REPORT)

"HAZARDOUS WASTE BEGATS HAZARDOUS WASTE"

D004 - D017

Types F006, F007, F008, F009, F010, F012, F018
K005, K006, K062, K086
P029, P030, P055, P074, P098, P106, P121
U052, U123, U134, U188

5. Is the generator presently...

A. Treating hazardous waste?

☒ Yes ☐ No

B. Storing hazardous wastes longer than 90 days?

☒ Yes ☐ No

C. Disposing hazardous waste?

Yes ☒ No

LEACHATE TREATMENT

IN 3 SURFACE IMPOUNDMENTS

NOT SINCE MAY 1984

Note: If the generator performs any of the activities noted in Question 5, then the inspector must complete Form B, entitled "RCRA Checklist for inspection of hazardous waste treatment, storage and disposal facilities."

6. In a manifest system currently in operation at the generator's facility so that offsite shipment of hazardous wastes can be tracked?

☒ Yes ☐ No

7. Please inspect the generator's manifest for the following information

262.20

- A. Is the TSD facility which receives a generator's hazardous waste identified by name, address, and EPA ID number? ☒ Yes ☐ No

262.20

- B. Is an alternative facility designated in case of an emergency? (Optional) ☐ Yes ☒ No

- C. Is a serialized manifest document number included on the form? ☒ Yes ☐ No

262.21

- D. Is the generator's name, address, telephone number and EPA ID number included on the form? ☒ Yes ☐ No

- E. Is the name and identification number of each transporter included on the form? ☒ Yes ☐ No

- F. Is a description of the generator's hazardous waste to be treated, stored, or disposed included on the manifest? ☒ Yes ☐ No

- G. Is the quantify of each waste by units of weight or volume and the type and number of containers loaded in the transport vehicle included on the manifest form? ☒ Yes ☐ No

- H. Is the following certification noted on the generator's manifest form and is the certification acknowledged by the generator's signature. ☒ Yes ☐ No

"This is to certify that the above-named materials are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the available regulations of the DOT and EPA."

262.22

- I. Are there adequate copies of the manifest available for generator, transporter, and TSD's? ☒ Yes ☐ No

262.34(a)(1)

8. Is all hazardous waste being shipped off-site by the generator within 90 days to a designated facility or placed in an on-site facility either of which has interim status or a Federal hazardous waste treatment, storage or disposal permit?

☒ Yes ☐ No

262.34(a)(3)

- A. Is the date accumulation of waste began clearly marked on each container?

~~Yes~~ ~~No~~

262.34(a)(2)

- B. Are storage containers or tanks in good condition, i.e., no corrosion, leaking or structural deformations?

~~Yes~~ ~~No~~

- C. Starting at the time of initial accumulation are the storage containers

N/A

262.34(a)(4)

- 1) Labeled

~~Yes~~ ~~No~~

262.34(a)(4)

- 2) Marked

~~Yes~~ ~~No~~

262.34(a)(2)

- 3) Packaged

~~Yes~~ ~~No~~

as containing a particular hazardous waste in accordance with DOT regulations?

Questions 9-15 apply to generators who accumulate wastes in a non-permitted facility.

265.16(a)

9. Have facility personnel successfully completed a program of classroom training or on-the-job training in hazardous waste management procedures?

☒ Yes ☐ No

BOTH R. KROUT & M. MILLER - 2 YRS COURSES IN LEACHATE TREATMENT. BOTH ARE CERTIFIED IN TREATMENT PLANT OPERS.

265.16(d)

10.

- Does the generator facility maintain a record of job titles for personnel that are involved with hazardous waste management and the name of the employee filling each job?

☒ Yes ☐ No

265.16(d)(2)

11.

- Does the generator facility have on record a written position description for each job title noted in Question #10?

☒ Yes ☐ No

FOR R. KROUT, MIKE MILLER & OTHERS - BUT NOT THE 4 EQUIPMENT OPERATORS.

265.16(d)(3)

12. Does the facility presently maintain a written description of the type and amount of introductory and continuing training for those employees noted in Question #10?

Yes ☒ No

NOT DOCUMENTED

R. KROUT IS ONLY EMPLOYEE IN DIRECT CONTACT W/LEACHATE

FOUR(4) EQUIPMENT OPERATORS ASSOCIATED W/LANDFILL

265.32(a)

13. Does the generator facility have installed the following equipment:

LEACHATE TREATMENT PLANT
AUTOMATIC SHUT-OFF IN
CASE OF EMERGENCY

- A. An internal communications or alarm system capable of providing immediate emergency instructions to facility personnel if the hazardous waste storage area is threatened by ~~fire~~ or ~~explosion~~?

Yes ☒ No

BUT N/A IN THIS
INSTANCE

* PHONES

* HAND-HELD 2-WAY RADIOS

* C.B.s IN TRUCKS

- B. A device at the scene of hazardous waste generator operations capable of summoning emergency assistance from Police, Fire departments, etc.?

☒ Yes No

- C. Fire control equipment and an adequate supply of fire fighting water or fire suppression chemicals?

☒ Yes No

265.35

14. Does the generator facility have adequate aisle space to allow the unobstructed movement of personnel and equipment during emergencies?

☒ Yes No

265.50

15. Does the facility have a contingency plan which contains the following elements:

- A. Detailed description of emergency procedures facility personnel will implement in response to fires, explosions, or unplanned releases of hazardous wastes to air, soil, and water?

☒ Yes No

265.52(c)

I&J SPILL SERVICE, INC
NORRISTOWN, PA

- B. A detailed description of arrangements formally agreed to by local police, fire departments, and State and local emergency teams to provide assistance during emergency situations?

☒ Yes No

265.52(d)

- C. A listing of names, addresses, and phone numbers of the generator facility emergency response coordinators?

☒ Yes No

PLUS TWO (2)
ALTERNATES

Note: This listing should include names and phone numbers of emergency coordinators available on twenty-four hour basis.

265.52(e)

- D. A list of appropriate emergency equipment necessary to cope with emergencies at the generator facility?

☒ Yes No

NOT KNOWN

265.53

16. Has a copy of the contingency Plan been submitted to local police, fire departments, hospitals, and emergency response teams that may be called on to provide emergency services.
17. Please provide detailed explanation or comments on specific questions or problems encountered during the inspection. For instance, industry requests for exclusions from optional portions of the regulation or for clarification of specific RCRA rules and regulations and their applicability at the facility can be noted below or described in a separate memo attached to the inspector's checklist.
- _____
- _____
- _____
- _____
- _____
- _____

Inspector's Name: DREW LAUSCHTitle: HYDROGEOLOGISTAgency: U.S. EPA/CRLOffice location: ANNAPOLIS, MDDate of Inspection: 4/28/87

Inspector's Name: _____

Title _____

Office Location _____

Date of Inspection: _____

RCRA CHECKLIST FOR INSPECTION OF TSD FACILITIES

NO USE

Name of Facility: BOVERTOWN SANITARY DISPOSAL CO., INC
 Address: 300 MERKEL ROAD
GILBERTSVILLE, PA 19525
 EPA TSD ID Number: PAD048603005
 Facility Inspection Representative: M. MILLER
 Title: VICE-PRESIDENT / GENERAL MANAGER
 Telephone: 215-367-1300

Inspection File

No. _____

Reviewer _____

Date reviewed _____

Form "B"

SITE CHARACTERIZATION

(Please denote if the facility presently treats, stores, or disposes of hazardous waste. Also, mark the appropriate sub-category that occurs at the particular facility.)

TREATER

☐ Filtration
☐ Incineration
☐ Thermal Reduction
☐ Recycling/Recovery
☒ Chem/Phys/Bio Treatments
☐ Waste Oil
☐ Reprocessing
☐ Solvent Recovery
☐ Other _____

STORER

☐ Open Pile
☒ Surface Impoundment
☐ Drum
☐ Above ground tank(s)
☐ Below ground tank(s)
☐ Other _____

DISPOSER

☒ Landfill operation
☐ Land treatment
☐ Surface Impoundment
☐ Other _____

→ H.W. LAST PLACED
 IN LANDFILL ON
 MAY 1984; SOLID WASTE
 ON 12/31/86.

INSPECTION PROCEDURE

COMPOSITION OF RAW & TREATED LEACHATE: MANY
 ANALYSES HAVE BEEN PERFORMED.

1. Does the facility generate hazardous waste? (Yes)

Note: Please complete the generators checklist, Numbers 1 thru 8, if the TSD facility generates hazardous wastes which are disposed off-site.

2. Does the on-site or off-site facility have a written waste analysis plan? N/A - LEACHATE COMPOSITION IS CONSTANT Yes

3. Does the TSD facility have a 24-hour surveillance system which monitors and controls entry to the active portion of the facility? Yes

If Not

- A. Does the facility have an artificial or natural boundary which surrounds active portions of the facility and, Yes
FENCE DOES NOT COMPLETELY SURROUND LANDFILL
 B. Does the facility have means to control entry at all times, i.e., gates, attendants, locked entrances, etc.? (Yes)

4. Does the TSD facility have a restricted access sign posted at each entrance to the active portion of the facility? An example would be: "Danger-Unauthorized Personnel Keep Out!" (Yes)

→ SEE COMMENT AT END OF CHECKLIST.

3. Does the TSD facility have a written schedule for inspecting all emergency equipment and monitoring equipment, security devices, and operating and structural equipment. ☒ Yes ☐ No
- (a) 6. Have facility personnel successfully completed a program of classroom training or on-the-job training in hazardous waste management procedures? ☒ Yes ☐ No
- (d) 7. Does the TSD facility maintain a record of job titles for all personnel that are involved with the handling of hazardous waste and the name of the employee filling each job? ☒ Yes ☐ No
- (d) 8. Does the TSD facility have on record a written position description for each job title noted in Question #7? ☒ Yes ☐ No
- (d) 9. Does the facility maintain a written description for the type and amount of introductory and continuing training for those employees noted in Question #7? Yes ☒ No
10. Does the TSD facility have installed the following equipment:
- A. An internal communications or alarm system capable of providing immediate emergency instructions to facility personnel if the hazardous waste storage area is threatened by fire or explosion? ~~Yes~~ ☒ No
- N/A - SEE GENERATOR CHECKLIST
- B. A device at the scene of hazardous waste TSD operations capable of summoning emergency assistance from Police, Fire departments, etc.? ☒ Yes ☐ No
- C. Fire control equipment and an adequate supply of fire fighting water or fire suppression chemicals? ☒ Yes ☐ No
- 35 11. Does the TSD facility have adequate aisle space to allow the unobstructed movement of personnel and equipment during emergencies? ☒ Yes ☐ No
12. Does the facility have a contingency plan which contains the following elements: ☒ Yes ☐ No
- A. A detailed description of emergency procedures facility personnel will implement in response to fires, explosions, or unplanned releases of hazardous wastes to air, soil, and water? ☒ Yes ☐ No
- 52(c) B. A detailed description of arrangements formally agreed to by local police, fire departments, and State and local emergency teams to provide assistance during emergency situations? ☒ Yes ☐ No
- 52(d) C. A listing of names, addresses, and phone numbers of the TSD facility emergency response coordinators?
Note: This listing should include names and phone numbers of emergency coordinators available on twenty-four hour basis. ☒ Yes ☐ No
- 52(e) D. A list of appropriate emergency equipment necessary to cope with emergencies at the TSD facility? ☒ Yes ☐ No

13. Does the facility have at all times at least one employee either on-call or on the site who is responsible for coordinating all emergency response measures? ☒ Yes ☐ No

14. Does the on-site or off-site facility have a written operating record which contains the following information:

(b)(1) A. A description and the quantity of each hazardous waste received/managed at the on-site or off-site treatment, storage or disposal facility. ☒ Yes ☐ No

(b)(2) B. The location of each hazardous waste managed at the on-site or off-site facility. ☒ Yes ☐ No

(b)(3) D. Copies of facility specific waste analysis as required by §§ 265.193, 265.225, 265.252, 265.273, 265.345, 265.375 and 265.402. ☒ Yes ☐ No

(b)(3) C. Written results of all chemical/Physical analyses of each waste treated, stored or disposed of at the facility. ☒ Yes ☐ No

(b)(4) E. Summary reports of incidents requiring implementation of the contingency plan. ☒ Yes ☐ No

(b)(5) F. Records and results of all inspections (see #5) in an inspection log or summary. ☒ Yes ☐ No

(b)(6) G. Results from groundwater monitoring (For surface impoundments, land treatment or land disposal facilities). ☒ Yes ☐ No

(b)(7) H. Closure cost estimate. ☒ Yes ☐ No

I. Post Closure cost estimate (land disposal facilities only) ☒ Yes ☐ No

15. Has the TSD facility operator completed a written closure or post closure plan in order to meet the May 1981 date for implementation of these requirements?

Does the TSD facility have:

A. Written Closure Plan ☒ Yes ☐ No

B. Written Post Closure Plan (land disposal Facility only) ☒ Yes ☐ No

16. Does the TSD facility receive waste from off-site generators? ☒ Yes ☐ No

If yes, does the operator implement the following procedures:

A. Inspect or analyze incoming wastes and compare with manifest for each shipment received at the facility. ☒ Yes ☐ No

B. Specify procedures in the waste analysis plan to carry out #16A. ☒ Yes ☐ No

C. Sign and date all manifest copies? ☒ Yes ☐ No

D. Return copies of the manifest to the generator and transporter? ☒ Yes ☐ No

E. Retain copies of all manifests at the facility for three years? ☒ Yes ☐ No

17. Has the operator installed a groundwater monitoring system which consists of: ☒ Yes ☐ No
- A. At least one well hydraulically upgradient at the limit of waste management area? ☒ Yes ☐ No
- B. At least 3 wells hydraulically downgradient at the limit of the waste management area? ☒ Yes ☐ No
18. Are all monitoring wells cased in a manner to prevent contamination of samples and groundwater? ☒ Yes ☐ No
19. *MW-6 IS NOT.* Do wells monitor groundwater in the uppermost aquifer underlying the facility? ☒ Yes ☐ No
20. Has the operator developed and followed groundwater sampling and analysis plan? ☒ Yes ☐ No
21. Does the plan include methods for establishing concentrations of parameters characterizing... ☒ Yes ☐ No
- A. Groundwater Suitability. (265.92(b)(1)). ☒ Yes ☐ No
- B. Groundwater quality (265.92(b)(2)) ☒ Yes ☐ No
- C. Groundwater Contamination (265.92(b)(3)). ☒ Yes ☐ No
22. Has the groundwater monitoring program been implemented by a qualified geologist or geotechnical engineer? ☒ Yes ☐ No
23. The inspector should check for the following conditions at the TSD facility:
- A. Open fires ☒ Yes ☐ No
- B. Fumes or gases ☒ Yes ☐ No
- C. *MILD ODOR ASSOCIATED W/LANDFILL* Leaks or corrosion in containers or other storage structures ☒ Yes ☐ No
- D. Leachate to receiving streams ☒ Yes ☐ No
- E. Malfunction of equipment ☒ Yes ☐ No
- F. Bulging drums ☒ Yes ☐ No
- G. Excessive heat generation from storage facilities, lagoons, storage piles, etc. ☒ Yes ☐ No
24. Please provide detailed comments and explanations on specific checklist items or problems encountered during the TSD facility inspection. For instance, industry requests for clarification of specific rules and regulations and their applicability at the facility can be noted below or described in a separate memo attached to the inspector's checklist.

Inspector's Name: DREW LAUSCH

Title: HYDROGEOLOGIST

Agency: U.S. EPA/CRL

Office Location: ANNAPOLIS, MD

Date of Inspection: 4/28/87

Inspector's Name: _____

Title: _____

Agency: _____

Office location: _____

Date of Inspection: _____

COMMENT: QUESTION #2: THE CHEM/PHYS CHARACTERISTICS OF LEACHATE ARE WELL KNOWN. LEACHATE IS SAMPLED ONCE/WK AT TWO (2) LOCATIONS: (1) PRIOR TO ENTERING FIXED FILM REACTOR AND (2) BETWEEN CARBON ADSORPTION COLUMNS. SAMPLES TAKEN/ANALYZED BY RMC ENVIRONMENTAL CHEMISTRY LABORATORY, POTTSTOWN, PA.

RCRA Checklist for Surface Impoundments

(Subpart K Section 265.222 "General Operating Requirements")

R.O. USE

Inspection file No:

Reviewer:

Date Reviewed:

Form "K"

Name of Facility: BOVERTOWN SANITARY DISPOSAL CO., INC
 Address: 300 MERKEL ROAD
GILBERTSVILLE, PA 19525
 A Generator ID Number: PAD048603005
 Facility Inspection Representative: MICHAEL MILLER
 Title: VICE-PRESIDENT / GENERAL MANAGER
 Telephone Number: 215-367-1300

The questions contained in this checklist apply to owners and operators of facilities that
 use surface impoundments to treat, store, or dispose of hazardous waste, except as Part
 5. provides otherwise.

Part. Regs.
 C.F.R.
 Part:

RAW LEACHATE IMPOUNDMENT

- | | | | |
|--------------------------|--|--------------------------------------|-------------------------------------|
| 5.222 | 1. Is 2 ft. of freeboard maintained in the surface impoundment? | Yes | <input checked="" type="radio"/> No |
| 5.223 | 2. Do all earthen dikes have protective covers (e.g., grass, shale or rock) to minimize wind and water erosion and to preserve dike structural integrity? | <input checked="" type="radio"/> Yes | No |
| 5.225(a)
(1) &
(2) | 3. Are waste analyses conducted or written documentation obtained before placing a substantially different hazardous waste into a surface impoundment used for storage or treatment?
N/A - LANDFILL LEACHATE CONSTANT COMPOSITION | Yes | No |
| 5.226(a)
(1) | 4. Is the freeboard level inspected at least once each operating day? | Yes | <input checked="" type="radio"/> No |
| 5.226(a)
(2) | 5. Is the surface impoundment, including dikes and vegetation, inspected once per week to detect leaks or deterioration or failures in the impoundment? | Yes | <input checked="" type="radio"/> No |
| | 6. Are the results of these inspections recorded in an inspection log or summary? | Yes | <input checked="" type="radio"/> No |
| 5.229(a) | 7. Are ignitable or reactive wastes stored in a surface impoundment: If so, | Yes | <input checked="" type="radio"/> No |
| 5.229(a)
(1) | a) Is the waste treated, rendered, or mixed before or immediately after placement in the impoundment so that the resulting waste, mixture or dissolution of material no longer meets the definition of ignitable or reactive waste under parts 261.21 or 261.23 of the RCRA regulations? | N/A | Yes No |

230

b) Are incompatible wastes segregated in separate surface impoundments so that spontaneous reactions are avoided?

N/A

~~Yes~~ No

Inspector's Name: DREW LAUSCH

Title: HYDROGEOLOGIST

Agency: U.S. EPA/CRL

Office location: ANNAPOLIS, MD

Date of Inspection: 4/28/87

Inspector's Name: _____

Title: _____

Agency: _____

Office location: _____

Date of Inspection: _____

RCRA Checklist for Surface Impoundments

(Subpart K Section 265.222 "General Operating Requirements")

R.O. USE

Inspection file No:

Reviewer:

Date Reviewed:

Form "K"

Name of Facility: BOYERTOWN SANITARY DISPOSAL CO., INC.
 Address: 300 MERCEL ROAD
GILBERTSVILLE, PA 19525
 A Generator ID Number: PAD 0486 03005
 Facility Inspection Representative: MICHAEL MILLER
 Title: VICE-PRESIDENT / GENERAL MANAGER
 Telephone Number: 215-367-1300

The questions contained in this checklist apply to owners and operators of facilities that
 use surface impoundments to treat, store, or dispose of hazardous waste, except as Part
 265.222 provides otherwise.

Part. Regs.
 40 C.F.R.
 Part:

TREATED LEACHATE IMPOUNDMENTS

- | | | | |
|--------------------------|--|--|-------------------------------------|
| 5.222 | 1. Is 2 ft. of freeboard maintained in the surface impoundment? | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| 5.223 | 2. Do all earthen dikes have protective covers (e.g., grass, shale or rock) to minimize wind and water erosion and to preserve dike structural integrity? | <input checked="" type="radio"/> Yes | <input type="radio"/> No |
| 5.225(a)
(1) &
(2) | 3. Are waste analyses conducted or written documentation obtained before placing a substantially different hazardous waste into a surface impoundment used for storage or treatment?
<u>N/A - CONSTANT COMPOSITION</u> | Yes | No |
| 5.226(a)
(1) | 4. Is the freeboard level inspected at least once each operating day? | Yes | <input checked="" type="radio"/> No |
| 5.226(a)
(2) | 5. Is the surface impoundment, including dikes and vegetation, inspected once per week to detect leaks or deterioration or failures in the impoundment? | Yes | <input checked="" type="radio"/> No |
| | 6. Are the results of these inspections recorded in an inspection log or summary? | Yes | <input checked="" type="radio"/> No |
| 5.229(a) | 7. Are ignitable or reactive wastes stored in a surface impoundment: If so, | Yes | <input checked="" type="radio"/> No |
| 5.229(a)
(1) | a) Is the waste treated, rendered, or mixed before or immediately after placement in the impoundment so that the resulting waste, mixture or dissolution of material no longer meets the definition of ignitable or reactive waste under parts 261.21 or 261.23 of the RCRA regulations? | <u>N/A</u>
Yes No | |

5.230

b) Are incompatible wastes segregated in separate surface impoundments so that spontaneous reactions are avoided?

N/A

~~Yes~~ ~~No~~

Inspector's Name: DREW LAUSCH

Title: HYDROGEOLOGIST

Agency: U.S. EPA/CRL

Office location: ANNAPOLIS, MD

Date of Inspection: 4/28/87

Inspector's Name: _____

Title: _____

Agency: _____

Office location: _____

Date of Inspection: _____

RCRA Checklist for Landfills

(Subpart N Section 265.300 "General Operating Requirements")

R.O. USE

Inspection file No:

Name of Facility: BOYERTOWN SANITARY DISPOSAL COMPANY, INC.

Address: 300 MERKEL ROAD

GILBERTSVILLE, PA 19525

EPA Generator ID Number: PAD048603005

Facility Inspection Representative: MICHAEL MILLER

Title: VICE-PRESIDENT / GENERAL MANAGER

Telephone Number: 215-367-1300

Reviewer:

Date Reviewed:

Form "N"

The questions contained in this checklist apply to owners and operators of facilities that dispose of hazardous waste in landfills, except as Section 265.1 provides otherwise. A waste pile used as a disposal facility is a landfill and is governed by this subpart.

Vert. Regs.
40 C.F.R.
Part:

- | | | | |
|---------------|--|--|-----------|
| 265.352(a) | 1. Is run-on diverted away from active portions of the facility? | <u>Yes</u> | No |
| 265.302(b) | 2. Is run-off collected from active portions of the landfill? | <u>Yes</u> | No |
| 265.302 | 3. Has a hazardous waste determination been made on the run-off in accordance with Part 261? (Identification and Listing of Hazardous Waste) | <u>STORMWATER DIVERSION SWALES E-1, E-2, E-3</u>
<u>SEDIMENTATION BASINS #1, #2, #3 (FOR EXPANSION SITE ONLY)</u>
<u>NONE OF THE 2 EXISTING SEDIMENTATION BASINS HAVE EVER BEEN ANALYZED</u> | |
| 265.302(d) | 4. Is the landfill managed to control wind dispersal? | <u>Yes</u> | No |
| 265.309(a) | 5. Are the following items maintained in the operating record: | | |
| | a) on a map, the exact location and dimensions, including depth, of each cell with respect to permanently surveyed benchmarks? | <u>Yes</u> | No |
| 265.309 (b) | b) contents of each cell and approximate location of each hazardous waste type within the cell? | <u>Yes</u> | No |
| 265.314(a)(1) | 6. Are bulk, non-containerized or waste containing free liquids placed in the landfill? If so, (NOT AFTER 5/8/85) | Yes | <u>No</u> |
| 265.314(a)(2) | a) is a <u>leachate collection system</u> available to remove leachate? | N/A | <u>No</u> |
| | b) is the liquid stabilized or treated <u>physically</u> or <u>chemically</u> prior to disposal? | N/A | <u>No</u> |
| 315 | 7. Are empty containers <u>crushed</u> flat or shredded before burial in the landfill? | <u>Yes</u> | No |

.314(b)

8. Are containers holding liquid waste or waste containing free liquids placed in the landfill? If so:

Yes ☒ No

Describe types of containers below:

SINCE MAY 84 ONLY SANITARY REFUSE
DISPOSED IN LANDFILL. SOLID WASTE LAST
PLACED IN LANDFILL ON 12/31/86.

9. Are ignitable or reactive wastes placed in a landfill? If so,

Yes ☒ No

- a) Is the waste treated, rendered, or mixed before or immediately after placement in the landfill so that the resulting waste, mixture, or dissolution of material no longer meets the definition of ignitable or reactive waste under Section 262.21 or Section 261.23 and Section 265.17(b). is complied with?

~~Yes~~ No N/A

- b) Are incompatible wastes segregated in different landfill cells? If no,

~~Yes~~ No N/A

- c) Is the procedure in compliance with Part 265.17(b)?

~~Yes~~ No N/A

Inspector's Name: DREW LAUSCH

Title: HYDROGEOLOGIST

Agency: U.S. EPA/CRL

Office location: ANNAPOLIS, MD

Date of Inspection: 4/28/87

Inspector's Name: _____

Title: _____

Agency: _____

Office location: _____

RCRA Checklist for Chemical, Physical and Biological Treatment

(Subpart Q Part 265.40 - "General Operating Requirements")

R.O. USE

Inspection file No:

Reviewer:

Date Reviewed:

Form "Q"

Name of Facility: BOYERTOWN SANITARY DISPOSAL COMPANY, INC

Address: 300 MERCEL ROAD

GILBERTSVILLE, PA 19525

EPA Generator ID Number: PAD048603005

Facility Inspection Representative: MICHAEL MILLER

Title: VICE-PRESIDENT / GENERAL MANAGER

Telephone Number: 215-367-1300

The questions contained in this checklist apply to owners and operators of facilities which treat hazardous wastes by chemical, physical, or biological methods in other than tanks, surface impoundments and land treatment facilities except as Section 265.1 provides otherwise.

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0 C.F.R.
art:

LEACHATE TREATMENT SYSTEM

- | | | | |
|-----------------|--|--------------------------------------|---------------|
| 65.401(b) | 1. Are all treatment processes or equipment in good condition, i.e., not showing signs of leakage, corrosion or any other deterioration? | <input checked="" type="radio"/> Yes | No |
| 65.401(c) | 2. Are treatment processes or equipment with continuous inflow of hazardous waste equipped with a means to stop this inflow? (e.g., waste feed cutoff system or bypass system to a standby containment device) | <input checked="" type="radio"/> Yes | No |
| 65.402(1) & (2) | 3. Are waste analyses performed or written documentation obtained before placing a substantially different hazardous waste into treatment processes or equipment? | Yes | No |
| | <u>N/A - LEACHATE CONSTANT COMPOSITION</u> | | |
| | 4. Is this information recorded in the facility's operating record? | <input checked="" type="radio"/> Yes | No |
| 65.403(a) (1) | 5. Are daily inspections conducted for discharge control equipment (e.g., bypass systems, waste feed cut-off systems, drainage systems and pressure relief systems)? | <input checked="" type="radio"/> Yes | No |
| 65.403(a) (2) | 6. Is data gathered from monitoring equipment (e.g., pressure and temperature gauges) at least once each operating day? | <input checked="" type="radio"/> Yes | No |
| 65.403(a) (3) | 7. Are construction materials of the treatment process or equipment and immediate surrounding area inspected weekly for signs of leakage, corrosion or any other deterioration? | <input checked="" type="radio"/> Yes | No |

8. Are the results of these inspections recorded in an inspection log or summary? BOTH A LOG AND SUMMARY KEPT. ☒ Yes ☐ No

9. Are ignitable or reactive wastes placed in a treatment process? ☐ Yes ☒ No
If so,

A. Are the wastes treated, rendered, or mixed before or immediately after placement in the treatment process or equipment so that the resulting waste, mixture, or dissolution of material no longer meets the definition of ignitable or reactive wastes under Section 261.21 or 261.23 of the RCRA regulations? ☐ Yes ☐ No N/A

B. Are the wastes treated in such a way that they are protected from any material or conditions which may cause the waste to ignite or react? ☐ Yes ☐ No N/A

10. Are incompatible wastes kept from being placed in the same treatment process or equipment? ☐ Yes ☐ No N/A

Inspector's Name: DREW LAUSCH

Title: HYDROGEOLOGIST

Agency: U.S. EPA/CRL

Office Location: ANNAPOLIS, MD

Date of Inspection: 4/28/87

Inspector's Name: _____

Title: _____

Agency: _____

Office Location: _____

Date of Inspection: _____



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL RESOURCES

1875 New Hope Street
Norristown, Pennsylvania 19401
215-270-1948

March 2, 1987

Mr. Warren Frame
Boyertown Sanitary Disposal Co., Inc.
300 Merkel Road
Gilbertsville, PA 19525

Dear Mr. Frame:

The following is my understanding of what took place at a meeting held with representatives of your company including your attorney and representatives of the Department at the Norristown Regional Office on February 17, 1987 concerning how we will proceed on processing your bond and your status as a hazardous waste closed landfill and the expansion application still pending before us for expansion of your site as a municipal and residual waste landfill. These items will read as follows:

1. We will agree to let you roll over the existing municipal and residual waste bond with a current liability of over \$200,000 into initial payment of \$900,000 for the hazardous waste bond for the closed landfill site. This must include straightening out the problem on executing the last payment which has not been approved for several months.
2. When you receive an expansion permit for the municipal and residual waste site expansion, you will have 90 days from the date of issuance of that permit to post the remainder of the hazardous waste bond total liability which should total approximately \$2.6 million. If this permit is not issued, then the hazardous waste bond must still be paid on a phased payment schedule of an equal amount each year for the next 10 years until the total liability has been paid.
3. I contacted Mr. Ron Hassinger this morning, concerning the delisting request you will be preparing involving two impoundments in your treatment system where raw landfill leachate has already been treated just prior to discharge to the Berks-Montgomery Municipal Authority. If the waste in these impoundments can be delisted, then a Part B application will not have to be submitted for permitting these units as hazardous waste management units and they will not have to be closed on November 1, 1988.
4. A hazardous waste Part B application will still have to be submitted to this office involving the treatment of landfill leachate before it is discharged to the Berks-Montgomery Municipal Authority system. It is still our position that this cannot be covered under permit-by-rule because the landfill itself is a commercial facility which accepted different types of waste which result in the leachate treatment stream which has to be handled for many years.

Mr. Warren Frame

March 2, 1987

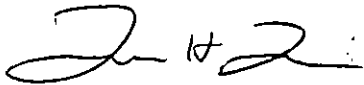
- 2 -

5. A consent order and agreement can be worked out between this Department and your company involving the submission of the hazardous waste Part B application for the leachate treatment system, the submission of a closure plan for the raw leachate impoundment which would be converted to an above ground tank, which would allow for the submission of plans and the Department's approval of these plans so that construction can proceed on putting in the tank treatment system while the Part B application is pending. This would enable you to certify that the raw leachate impoundment would be in fact closed by November 1, 1988.
6. We are still in need of the monitoring well information which must be included in the hazardous waste closure plan so it can be approved.

If we proceed in this manner, it should put you on the correct course to be in compliance with proper closure of the hazardous waste facility and permitting of the hazardous waste treatment facility plus the permitting of the municipal and residual waste expansion landfill.

If you have any remaining questions concerning this letter, I can be reached at 270-1948.

Very truly yours,



LAWRENCE H. LUNSK
Regional Waste Management Facilities Supervisor

cc: Mr. Danyliw
Mr. Morris
Mr. Broman
Re 30 SW54.5